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THE

# MEDICAL

AND

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CONDUCTED BY

T. BRADLEY, M.D.

R. BATTY, M.D.

AND

A. A. NOEHDEN, M.D.

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[By William Thorne, Red Lion Court, Fleet Street.]

THE

# Medical and Phyſical Jou nal.

VOL. XIII.] JANUARY 1, 1805. [NO. L I.

Printed for R. PHILLIPS, by W. Thorne, Red Lion Court, Fleet Street, London.

## To Dr. BRADLEY.

DEAR SIR,

DURING my late retirement at New Galloway, your Numbers arrived so slowly, and so irregularly, that I was not aware till my return to London of the notice with which two of your Correspondents had honoured me.

To Dr. Walker's remarks I have but little to say, as we seem not perfectly to understand each other. "If, says that gentleman, vaccine lymph can, under any circumstances, produce a general eruption: in such departure from its original character we have, perhaps, one first step of vacciola to its degenerated state of variola." By this are we to understand, that any doubt can remain that the vaccine inoculation is sometimes attended with a general or secondary eruption? Does any one doubt the cases related by so many experienced practitioners in England, and in other parts of Europe? Lastly, do they doubt, quod *ipse dixit*? Does not Dr. Jenner speak of eruptions succeeding the vaccine inoculation, under certain circumstances?

Dr. Walker afterwards remarks, that he has never noticed those varieties pointed out by me. This is very probable; but it should be remembered, that no one but Norris ever remarked the suspension of inoculation for small-pox by the Harmattan wind.

Dr. Walker suspects my conclusion, "that the eruptions in question arose from cow-pock matter, may, after all, have no better foundation than mere hypothesis." On this occasion I am satisfied to stand on the same ground as Dr. Woodville, who, as well as myself, inoculated with secondary vesicles, and produced the genuine cow-pox.

I am extremely glad to be set to rights in the last paragraph of this communication, and to find not only that the Jennerian Society have established a centre of com-

munication for receiving information on the subject of cow-pox, but also that their letters are post free. I cannot however help being surprised that this indulgence has not been extended to Dr. Jenner. The number of communications received by that gentleman must be still very considerable, because many people, like myself, will be ignorant of the committee and its privileges.

Mr. Ring's, as well as Dr. Walker's, exordium consists of a compliment. It is pleasing to see this urbanity among men who differ in opinion, and, indeed, who are scarcely known to each other but by this difference. It is very true, Mr. Ring, when we met previous to my journey into Scotland, mentioned not only his doubts relative to the vaccine eruptions which occurred in Madeira, but also his suspicions that they were variolous. I shall at present only observe, that of between twenty and thirty children, who had intercourse with the patients, none were casually infected, though all of them, when inoculated in classes, had the genuine cow-pox without secondary eruptions.

Mr. Ring remarks, that he has seen many such eruptions, but never saw any that resembled vaccine pustules. If by this is meant a resemblance to the inoculated part, we perfectly agree. But, adds Mr. Ring, *matter* taken from them has produced the chicken-pox. This is definitive as to this part of the controversy; the vesicles I speak of contained no *matter*, only a transparent lymph.

Mr. Ring's concluding remarks are most of them very just. Anonymous publications on a subject so important to human life and the tranquillity of thousands, should be considered as firebrands thrown at random, and should be instantly, and without inquiry, stifled. But communications from men of character, however imperfect, should be always attended to. We not only inform others by receiving and answering them, but we improve our own stock of knowledge, and by degrees shall learn an accuracy of discrimination which is still unattained. Add to this, the alarm is much lessened, when a subject is candidly heard, and the relater treated like a reasonable being, than when he is rudely contradicted or undervalued. Let us attend to the manner in which Mr. Cardan, of Worcester, treated a family who were prepared to calumniate him, and alarm a whole neighbourhood. A child, whom he had inoculated for cow-pox, had afterwards the small-pox. Whether there had been any irregularity in the first insertion would have been a very unimportant inquiry to the mother. This judicious practitioner therefore, without hesitation, admitted

ted the fact; observing, that the same thing sometimes, tho' rarely, happened in the small-pox after inoculation, or even when received in the casual way; that such an event was not to be generally expected, because the small-pox was rife through the neighbourhood, and few escaped who had not been inoculated with cow-pox; yet of the latter, this child alone had taken the disease. If, however, the neighbourhood were still alarmed, Mr. Cardan expressed his intention of being among them on the following day, when he should inoculate with small-pox all such as wished for it, and that all of them might have an opportunity of exposing themselves and their children to the effluvia of that disease. This fair proposal, joined to the conciliating manner in which it was made, quieted every suspicion; few gave themselves the trouble to inoculate, all exposed themselves without reserve, and all remained free from any variolous symptoms.

I shall now offer a few remarks on a very valuable paper by Dr. Macdonald, in answer to Mr. Goldson's pamphlet. It is most sincerely to be wished, that in all our controversies we could learn to give our antagonist credit for all the good intentions he professes. A very slight knowledge of the world will teach us, that this is the readiest way to convince him. If our wish is to convince the world, we should recollect that the *argumentum ad hominem* never fails to tell as much on one side as the other. If the favourers of vaccination should be ready to admit some of those motives, suspected by Dr. Macdonald, its enemies will think still worse of a cause which requires such insinuations to support it.

It is not my intention to go through the various statements and arguments with which this communication abounds. I am as well convinced as the author, that most if not all of Mr. Goldson's cases were attended with some irregularity, or some defect of evidence, which renders them unfit to form any decisive conclusion; but we should recollect that this very defect or acknowledged irregularity reflects the highest honour on Mr. Goldson. The following passage from Dr. Macdonald is transcribed, in order to shew his description of small-pox, and to draw what appears to me a fair conclusion from his inference.

" As these (Mr. Goldson's) cases never maturated, they never could have passed through their regular stages, so well marked in the small-pox, even in its mildest form. About the third or fourth day, eruptions make their appearance;

pearance; first, in the form of small red spots, hardly elevated. These gradually increase in size, and after two or three days more, form a small vesicle, which is surrounded by a circular inflamed margin, and contains a clear, limpid fluid. For the three or four succeeding days the pustules become larger, more elevated, and acquire their proper figure and size. At the end of this period, the clear limpid fluid contained in the vesicle is changed into a purulent matter, which is formed into a crust on its surface; and, lastly, after some time, these crusts fall off, and leave reddish brown spots on the skin below. Had any of Mr. Goldson's cases gone through such a regular course as this, I believe he would have done so much justice to his own cause, as not to have omitted that circumstance."— See Dr. Macdonald's paper, p. 321.

Can we have a stronger proof of Mr. Goldson's veracity, than that, when he was anxious to discredit vaccination, he should strain none of his evidence so far as to describe "that regular course," which must have silenced every objection? On the contrary, we find him describing no other course of symptoms than such as Dr. Macdonald sees no difficulty in proving, could not be variolous. I am aware it will be said, that though Mr. Goldson's facts are not decisive to the purpose for which he states them; yet, that he takes much pains to make them appear so. To this I answer, that we are by no means aware how much we are all warped by our own preconceptions, and that the utmost we can expect of each other is to confine ourselves to truth. Mr. Ring tells me, in "the paper above alluded to, that I shall not call Dr. Willan a zealot." To this I answer, that I call myself one; and the ardour with which Dr. Willan has pursued his inquiries, seems to entitle him to that epithet. It is this consciousness of zeal in ourselves that should induce us to make large allowances for each other's failings, and, like Mr. Goldson, to be particularly cautious in the statement of our facts, though they should be insufficient to insure those inferences we may wish to draw.

We shall however presently find, that Dr. Macdonald's description of small-pox is not always to be depended on. "But, (says he, p. 323) independent of this, the number of pustules and their duration by no means prove that it was the small-pox; I have frequently witnessed cases of varicella, where the pustules were as numerous, lasted as long, and left marks behind like the small-pox. Lest my authority should be deemed insufficient, I shall quote that of an

abler

abler judge. Mr. Ring, in his Treatise on Cow-pox, p. 829, mentions, that many people have seen the chicken-pox in some measure confluent, and that he himself has known a considerable number leave a cicatrix behind. In p. 895, he mentions the case of a child, in which the eruption was not complete until the tenth day; and the last vesicle did not disappear till the fourteenth." After this follow a number of instances, in which impostor drug-shop sweepers and respectable practitioners have deceived others, or been deceived themselves, not only in our own days, but in the days of older authors. "Both Cullen and Heberden, it is added, maintain, that *medical men* were often deceived by the chicken-pox, from its assuming the appearance of the small-pox." This subject occupies three or four pages, at the end of which, Dr. Macdonald, expressing a due deference to superior judgment, confesses himself sceptically inclined when cases are related of persons having small-pox twice, adding, that this opinion is not new any more than the uncertain discrimination between the chicken and small-pox.

That such doubts, and such uncertainties, should have existed formerly, is not very wonderful; but that, in the present day, we should be inquiring after a never-failing character of the small-pox, is not less surprising to me than if, at noon, we should be inquiring for the sun, when the sky is unclouded.

We have been anciently reminded, that we are of more value than the herb of the field, which to day is, and to morrow is cast into the oven. Were I to doubt such a position, who would not be justly offended? But I will be bold to say, that Botany is pursued with an ardor, and cultivated with an accuracy, to which Physiology, or rather Pathology, is a stranger. How well do I recollect the eagerness with which a botanist has searched for the nectarium attached to the bottom of the petal, in order to fix the genus Ranunculus. With what triumph have I seen a zealous disciple of Linnæus demonstrate to an Hudsonian this unequivocal character in what the latter called Ficaria verna. Each party had his never-failing marks to exhibit; to these each could appeal: and if they were neither disposed to be convinced, neither could dispute the evidence of his senses. Will it be believed, that in discriminating the small-pox we have marks as regular, as certain, as constant, and as unequivocal, to distinguish it from every other eruption, as the nectarium which characterizes the genus ranunculus? Will it be believed that this mark has

never been sought for, nor hinted at, in all the controversy that the important discovery of cow-pox has introduced?

In one of the volumes of the Philosophical Transactions, Mr. Hunter gives a case of small-pox in a child at its birth. To ascertain whether the disease was really small-pox, he dissected several of the pustules, and in each of them found the slough which lines the bottom of the pustules, and in some instances forms the future pitting. This, he assures us, is the true character of the small-pox, being constant in every pustule. The chicken-pox, on the contrary, is free from this appearance, the bottom never sloughing excepting in a few pustules where inflammation is particularly high. It is true, the Philosophical Transactions are not in every library, but when engaged in controversy, it becomes us to examine every source of information. Mr. Hunter has also mentioned this slough in the Introduction to his Treatise on the Blood, observing, that how slight soever the inflammation may be, it always induces slough. I should not have presumed to mention my own name after Mr. Hunter had been passed by, had it not been that some of the gentlemen alluded to, have done me the honour to quote me. In "Morbid Poisons" I have taken great care to describe this slough, when speaking of small-pox; and in the paper which Mr. Ring quotes from your Journal of April, 1803, I remarked, that my first business, after viewing my eruptive cases, was to search for the slough.*

Before I described this slough in "Morbid Poisons,' not thinking it sufficient to avail myself of Mr. Hunter's name, however respectable, it was my business to search for it, and afterwards to demonstrate it to the two apothecaries then resident at the Small-pox Hospital. I pointed it out to Mr. Pitcairn, at that time my pupil; and have lately induced Mr. King, of Clifton, to search for it, which he did to his own satisfaction.

In a letter to Dr. Clutterbuck, inserted in one of your Journals, the attention of the reader was particularly called to the slough; yet, though these controversies have continued for more than two years since that time, no writer has taken the trouble to dissect a pustule, or to avail himself of this only distinguishing characteristic of the disease. I should

* I wish it to be remarked, that this, and every other quotation excepting from your Journal, No. 68, is from memory, having at present no means of referring to my library.

should be ashamed of again reverting to the subject, were it not that the acknowledged want of any other certain diagnosis of small-pox renders it absolutely necessary. Let me therefore conclude with entreating, that whenever any future doubts are entertained of this disease, those who are disposed to write on the subject will dissect the pustules about the time they become purulent, before they scab; and at the bottom of each will be found a loose slough of a circular form, about the thickness of writing paper, which it resembles when soaked. If this is found, the disease is small-pox; if it is not found, the disease is not small-pox.

I am, &c.

*London, Nov. 20, 1804.* JOSEPH ADAMS.

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## Observations on select Subjects in Surgery.

### By Mr. Simmons.

( Continued from Vol. x. pp. 1—10. )

IN your Number for March (p. 210) are contained some judicious remarks by your very respectable Correspondent, Mr Hey, of Leeds, relative to the disease which he has denominated 'Fungus Hæmatodes,' in reply to my observations on a case inserted in your Number for July preceding. That case I had assumed as a more simple specimen of the 'Fungus Hæmatodes;' and from it had hoped to deduce, as far as a single case would go, a satisfactory pathology of the more intricate forms of that disease. Mr. Hey, however, is of a different opinion; so that rather than again enter, perhaps prematurely, on the subject, I shall wait the result of more ample experience. Meanwhile I may be permitted to observe, that, if my opinions are erroneous, instead of one, chirurgical nosology will be enriched by the accession of three new diseases; namely, the 'uncommon disease,' of Mr. Russell; the 'spongoid inflammation,' of Mr. Burns; and the 'Fungus Hæmatodes,' of Mr. Hey. The latter gentleman (p. 213) is indeed of opinion, that the 'spongoid inflammation,' and fungus hæmatodes,' are *one* and the same disease, although it may probably be thought by some, that his own brief mention of those two diseases, in the paper I am quoting, has disproved their identity. The contiguous lymphatic glands, and through these the system at large,

large, become contaminated, in the 'spongoid inflammation,' a consequence unknown in the 'fungus hæmatodes;' yet we all know that an ulcerated surface is most favourable to absorption. Were this distinction unimportant in practice, I should be less disposed to insist upon it here; but its influence over the curative means is very decisive. In the 'fungus hæmatodes' complete success may be expected, at any period of the disease, by the entire removal of the local affection; but in the 'spongoid inflammation,' after signs of absorption are manifested, any operation is unavailing. In this peculiarity it is analogous to cancer and other morbid poisons.

I join with the profession in general, in expressing my obligations to Mr. Hey for the very valuable present of his publication, and particularly for his renewed attention to the subject before me. If at any time I should dissent in opinion from so respectable an authority, it will always be done in distrust of my own judgment, and with an earnest desire to profit by his judicious corrections.

## On Tinea Capitis.

This is a loathsome and obstinate disease. It is confined to no sex nor age, though most common at an early period; yet, in some rare instances, it is of permanent duration, and continues through life. To acquire a remedy for an inveterate disease, is at all times desirable; and to be able to subdue one of a nature so intractable, is an object greatly to be wished; yet the several means that have been recommended in tinea capitis, are not only both harsh and offensive, as an enumeration of them (which would be superfluous here) would amply testify; but they are far from being speedily or durably effectual.

It is enough, for my present purpose, to propose a method of treating it, not only free from these several objections, but in itself simple, mild, and unattended with pain in its application, and at the same time generally efficacious. I should have felt a delicacy in thus announcing any intimation of my own; but the facts on which I offer this proposal, are furnished me by my colleague, Mr. Bill. His remedy is scarcely any other than strips of adhesive plaster, so applied over the crusts as to make an equable compression, except in very bad cases, where other means are used in addition to it. But as he has favoured me with his ideas on the subject, I shall take the liberty to subjoin them, as conveyed in his own words.

"If the case be a mild one, I direct the head to be

cleared

cleared of the hair, either with a pair of scissars, or by shaving it, and then well washed with chamomile tea, in which some soft soap has been dissolved. This done, I apply strips of Baynton's plaster over the whole head, so as to form a complete cap. The strips should be about fourteen inches long, and an inch and a half broad, and laid on in such a manner as to make an equal compression over the whole scalp. This application should be renewed every third or fourth day, each time previously washing and shaving the head. Whilst the patient is under cure, I commonly prescribe, if the subject be a child, five or six grains of the hydrargyri cum sulphure, either alone, or mixed with a little rhubarb.

"Provided the case be a bad one, of long standing, and such as has resisted the remedies usually employed, I have recourse to a more complicated mode of treating the disease, which, hitherto, has not disappointed my expectations. In the first place, I order as much of the hair to be cut off with scissars, as can be done without exciting severe pain; then I direct a large emollient poultice to be applied night and morning for a day or two; then the head to be shaved, and washed with the solution of soft soap in chamomile tea, and afterwards rubbed with an ointment composed of equal parts of the saturnine and mercurial nitrated ointments.

"These applications, the poultice excepted, I repeat every night and morning, for a few days; then I employ Baynton's strips, as before directed. In cases that are very inveterate, the ointment may be rubbed on the head previous to each application of the plasters, though I believe it is not always necessary. During the time these applications are making, I usually direct the patient to take of Plummer's pill, and of the decoction of the woods, with antimonial wine, and sweet spirit of nitre, enjoining at the same time a milk and vegetable diet.

"By persisting regularly in this plan of treatment, I have effected a cure in some bad cases in less than a month. However, I am by no means so sanguine as to expect that this nasty disorder will, in every instance, yield to these remedies; or that the disease so subdued will never relapse again; but I am confident that the method which I have pointed out, will, if properly pursued, generally succeed.

"In a great variety of cases I apprehend that nothing more will be necessary to obtain a cure, than a judicious application of the plasters, with a suitable diet, attention to cleanliness, and the state of the bowels. Yet, after

after all, I would not have the plaster-bandage considered in any other light, than as a useful auxiliary in the cure of a troublesome complaint."

Mr. B. was led, as he informs me, by an easy transition, to the employment of the plaster bandage in tinea capitis, from his success with it in ulcers, and herpetic affections on the leg; and the justness of the analogy is confirmed by the most satisfactory result. As he has not himself indulged in any speculations in what manner the salutary effects are produced, I will here hazard a few thoughts on the subject.

If we consider the tinea capitis as a disease of local debility, (and in several of Mr. B's cases it was cured by the bandage alone, without the aid of internal remedies) the principle that governs the plaster bandage in the treatment of ulcers on the legs will, in the present instance, very closely apply. In this view I should be disposed to ascribe its active virtue to the mechanical principle of supplying tone, an early symptom of which is a good suppuration under the crusts; and this always indicates invigorated action, and a disposition to heal. Soon after the appearance of this favourable change, the crusts are cast off in quick succession, cicatrization is promoted, and finally this unmanageable disorder is both easily and speedily removed.

[To be continued.]

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## On the Puncture of the Urinary Bladder.

### by Mr. T. L. O. Davies.

I Was requested, on Sunday the 17th of June last, by a brother practitioner, to visit John Morley, a boy of about eleven years of age, who on the preceding Thursday had received a very considerable contusion on the perinæum, owing to his falling across some pales he was endeavouring to walk on.

The boy had passed no urine since the accident happened, and he was in the greatest agony, suffering from the over distension of the bladder. The perinæum, scrotum, and parts about, were exceedingly tense and swelled, and the cellular membrane so much loaded with extravasated blood, as to resemble in appearance, gangrene. Every thing that art could suggest had, I believe, been tried by the gentleman that first attended him. He had been

been bled, and his bowels thoroughly evacuated. Fomentations had been applied, and the warm bath also repeatedly used. The catheter had been several times attempted, but neither that nor the smallest bougie could be introduced. The case proving thus obstinate, (the pain increasing rapidly, indeed it was now excruciating, not a drop of urine having passed for at least seventy-two hours, and the bladder so amazingly tense and swelled, and extended nearly up to the scrobiculus cordis,) it appeared to me, no time was to be lost to endeavour to save the life of the child. I therefore recommended the puncture of the bladder immediately, but in what part became a matter of momentary deliberation. Surgeons are still divided in opinion, I believe, which is the safest and most advantageous way of getting into the bladder. In this case, the inflammation and tension of the parts absolutely forbid the puncture through the perinæum; and though the puncture through the rectum may possibly be, by the greater number, considered as the most eligible way, yet here I strenuously recommended the puncture above the pubis, as being more easily and readily performed, and less likely from its distance to the injured part, to increase the inflammation already formed.

Accordingly, a trocar, with a canula exactly two inches in length, was plunged into the bladder, nearly or about one inch and a half above the pubis, and two quarts or more of urine were immediately drawn off. The child experienced immediate relief; he was put into bed; the canula was suffered to remain in, having a cork fitted to it; and some holes having previously been drilled in the upper part, or shoulder, it was kept steady in its place by some tapes affixed to it, and fastened round the body, having a compress of linen and a T bandage over the whole. The child slept well the following night; in the morning the cork was taken out, and the water drawn off. By attention to regimen, and the child's bowels, no great degree of fever ensued, neither any tension or inflammation about the punctured part. The fomentation was continued to the perinæum and scrotum, and those parts were constantly covered with a poultice of bread and milk, by which means the extravasated blood in the cellular membrane became gradually absorbed. Not being in the habit of attending the patient regularly myself, I could not accurately note every symptom that occurred; but about the seventh day from the accident, we felt a fluctuation of matter in the perinæum, and I understood the boy

boy had had more pain there for the last two or three days. A puncture with the lancet was therefore immediately made, and a large quantity of ichorous matter let out. The wound was superficially dressed. The urine had been, and was still, daily twice or thrice drawn off through the canula, and a bougie also attempted to be introduced. About the twelfth day from the accident, we discovered that the boy, when endeavouring to make water, forced some urine through the wound in the perinæum, and we shortly after saw that a small quantity passed the natural passage. A small bougie was now introduced into the bladder, and suffered to remain there some hours. I wished, considering the canula had been in twelve days, without being once removed, now to take it out; but my friend not agreeing with me in that opinion, I consented to its continuance in the bladder two days longer. It was taken out then, and with great ease. The wound made by the trocar healed very readily, and the urine was evacuated through the urethra, and also through the wound in perinæo. The boy's health was tolerably good, except being rather reduced, we therefore gave him the cinchona three or four times a day; and in the course of two or three weeks, the wound in the perinæum was completely healed also. The abdomen became somewhat enlarged after the canula had been removed; it had a dropsical appearance, some urine, no doubt, escaped into its cavity; but by the use of a flannel bandage, and embrocating the part with a strong camphire liniment, the size of the belly diminished daily, and in about five weeks from the accident, the boy was in every respect cured.

To draw any inference from the successful termination of one solitary case, would be both unfair and futile. It is probable that in every case, where it is necessary to puncture the bladder, each mode, according to particular circumstances, may in its turn have a decided preference; but if I may venture an opinion, I should conceive there can scarcely ever be a well founded objection to the puncture above the pubis. The arguments I have only heard against it are, 1st. The necessity of leaving in a canula for so great a length of time, as may be necessary before the obstruction in the urethra is removed, and the difficulty and pain occasioned thereby in extracting it. 2dly. The puncture not being made in a depending part. In this case, the first of these objections was entirely done away; the canula, though it had been in the bladder fourteen

teen days, without being either by design or accident once removed, was taken out with the greatest ease. In regard to the second objection, the bladder was not only nearly emptied every time the cork was taken out of the canula, but a considerable quantity of an increased discharge of mucus was evacuated through the canula also, for three or four days before it was extracted.

## On the Bronchocele.

A lady, between forty and fifty years of age, applied to me about the beginning of the month of November, 1802, on account of a large tumour she had on the fore part of her neck. It had been, she told me, ten years growing, and was now increased to such a size, that she was obliged by her dress to hide the deformity. She had some time before applied to a surgeon, who had tried some external stimulants and mercurials, but in vain; and indeed, considering her time of life, I did not myself conceive that any medicine could be of use to her. Recollecting, however, in some former numbers of the Medical and Physical Journal, cases in which the efficacy of burnt sponge had been very strongly marked, I recommended her to try that medicine, as the only remedy I knew of. Though the lady suffered no inconvenience from the swelling, yet its having greatly increased of late, alarmed her, and she was determined to give the sponge a fair trial. I accordingly made some lozenges, each of which contained ʒß of burnt sponge. Of these she took three daily, by laying them under the tongue till they gradually dissolved; and in this way, without any interruption, she continued taking the lozenges, until she had swallowed sixteen ounces of the sponge. Not the least nausea was ever excited by it; but at the expiration of that time, no diminution whatever of the tumour taking place, my patient began to be disgusted, and was rather averse to continue the medicine longer; nor could I in my conscience request her. Her health was good, and she made her mind up to the deformity, on my assuring her, that such diseases were very rarely of any serious consequence.

The beginning of September, in the following year, I was sent for by the lady, on account of her health; she had lost her appetite, was grown thin, was feverish, &c. I looked at the tumour; it appeared of nearly the same size as when I saw it the year before. To mention more particularly her complaints is here unnecessary; but ap-

prehending some chronic inflammation about the liver, I thought it right, after giving some purgative medicines, to put her on a plan of deobstruents, with small doses of calomel. On this plan she continued till the beginning of November, when her health was perfectly re-established. At this time the tumour remained exactly in the same state: but I was most exceedingly surprized in about a week; after the lady called on me to show her neck, when it was diminished more than one half, and in a few days more, was wholly gone. The total dispersion of it was the work only of about ten days, and there is not at this moment any prospect of its re-appearance. Here now is a case, in which the sponge had no efficacy, and yet a curable case. To what cause then can we attribute the resolution of the tumour? Was it owing to the continued use of calomel? or, was it merely the effect of chance?

The true cause and nature of this disease is ill understood; that they are not all similar, I think beyond doubt; and that the contents of the bronchocele in my patient was water, I think as clear. Most probably the water was contained in a cyst or cysts, which bursting, occasioned the tumour so quickly to disappear; and I think I recollect hearing that the late Dr. Hunter dissected an enlarged thyroid gland, and found it made up of cysts containing water.

*Alresford, Hants, Nov.* 7, 1804.

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## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

BE pleased to give the following a place in your Journal if you think it of sufficient interest to deserve publication. The treatment, you will observe, was according to the improved practice of Dr. Kentish.

A young gentleman had incautiously left a pound of gunpowder in an open paper, and, forgetful of the circumstance, was examining the lock of his pistol; a spark from which, upon pulling down the flint, set the whole on fire, and enveloped him instantly in the flame and smoke, so that he was utterly at a loss to find his way out of the room; very providentially, however, the accident was immediately

mediately discovered, and some of the family speedily extinguished the fire upon his cloaths; an *under flannel dress* had preserved the trunk from injury, though the linen waistcoat and shirt were burnt through in several places. The head and face had suffered severely, and I found him in pain to a degree of agony, complaining of the burning sensation in his face, and begging for some *cold application* to relieve him.

After covering the injured part with spirit of turpentine, I gave him thirty drops of laudanum in a glass of wine, and in ten minutes (as he continued in extreme pain) twenty drops more, and recommended he should be put into a warm bed, for he complained of general coldness, and was in the most compleat alarm as to the consequence. His attendant was directed to give twenty drops of the laudanum, in addition to what he had taken, if the pain did not abate in half an hour; but there was no occasion for the repetition of the anodyne, he soon became perfectly easy, and passed an exceeding good night. Several vesications appeared on the neck and throat the next morning, but these healed readily; and after a few days confinement to his room, and a redness of the whole face, which continued for several weeks, he got well without any mark or blemish whatever from the burn.

I have not thought it necessary to be very minute in detailing this case, as the object intended is merely to appreciate the sound and philosophical principles upon which the practice is founded. I have not seen any paper upon this interesting and important subject in your Journal; and if it directs the attention of medical men to the valuable pamphlet of Dr. K. I shall have the satisfaction of paying a just compliment to the merit of the author, and serving at the same time, as he proposed, the cause of humanity.

The Editors would perform a very acceptable service to the community if they would condescend to add their strictures upon the present fashionable dress of light and inflammable materials; pointing out the injurious effects upon the health in a general view, and the almost certain destruction of the individual in the event of any accident by fire.

I am, &c.

W. CROWFOOT.

*Beccles, Nov. 7,* 1804.

To

## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

WHEN we can snatch a fellow-creature from impending death, or even alleviate his sufferings, and render the remaining period of his existence comfortable, we feel the cheering influence of a ray emanating from the purest source of pleasure. Our gratification is more heightened, if the means made use of promise to contribute to the relief of others labouring under similar afflictions.

In compliance with the request of Mr. Jenkinson, in the 64th Number of your Journal, I shall state the strikingly beneficial effects of the solutio arsenici in an inveterate case of chronic rheumatism.

——— Ward, a female, who is now about the age of 35, was suddenly attacked, about two years since, with a violent pain near the middle of the spine, which hindered her from bending forwards without extreme difficulty. It was accompanied by a distressing pain in the epigastric region, attended by dyspepsia. She was pregnant at that time, and in a few days a miscarriage ensued. The pain then nearly left her; but it returned with redoubled violence in about a month. Her joints became affected, particularly her knees and ankles, which rendered walking extremely irksome; those of her fingers began to swell, and one of them became enlarged to nearly twice its proper size. She received only a temporary alleviation by the aid of remedies usually applied in such cases, though assisted by electricity.

She gradually became worse till the month of June last, when she began to take the solution, as recommended by Mr. J. In a few weeks she was much relieved, and was capable of walking without being incommoded by the pain; and since that time the swelling of her joints has decreased, and her general health is much improved.

There are two things worthy of particular notice in this case. 1st. The disease never put on the characteristic appearance of acute rheumatism. 2d. From the peculiar appearance of the countenance, and state of the pulse, tonic remedies seemed indicated; but none of them produced the effect of invigorating the system till arsenic was given. She still perseveres in using the medicine, and has the very pleasing prospect of a permanent cure from the use of it. I am, &c.

*Nottingham, Nov.* 7, 1804. JOHN WHITLAM.

## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

IT being known at Madrid that Dr. Joseph Alcaraz, of Alicante, made use of oil for the cure of the yellow fever, a letter was written to him by order of the supreme Tribunal of Health there, desiring information; and his answer was published in the Madrid Gazette of Tuesday the 30th of October last, of which the following is a copy, translated by Mr. Hunter, British Consul General there.

The instant that patients are found to be attacked with the disorder, I order them to be rubbed with common oil, for about five minutes, over the whole body, except the breast and face; in this operation about half a pound of oil is expended; then I make them drink two cups of infusion of elder-flower made like tea, and to be covered up warm, shutting the windows, and fumigating the room with thyme. Every three hours I order them a cup of broth, and in the intermediate space the infusion of elder-flowers. This method is continued until a copious sweat comes on, which is generally followed by a bilious diarrhœa; and when the diarrhœa does not come on spontaneously, I endeavour to promote it by clysters of sea water. By these two evacuations I have cured the disorder in the two first days, without its passing to the second period, in all the forty-five patients whose names are annexed, and without any other remedy thereafter but tincture of bark to those who remained weak. I have observed further, that those frictions are not so sure a remedy to those patients who have entered into the second period of the disorder, which is commonly the third or fourth day, as the nervous system is then affected; but, at the same time, I have not failed of curing many of those who were in a very advanced period of the disease, and in whom the terrible symptoms of black vomit, hæmorrhage, and convulsions had already appeared. The forty-five persons whose names are mentioned, are those cured in the first period, without any other remedy but the friction of oil, without including many others cured in other periods, whose names have escaped me from my continual occupations.

Here follows the names, and after that a certificate by a Deputy of the Health Office at Alicante.

Copy, signed J. H. Consul General, Madrid.

As the names would only be superfluous, I have here omitted them; and I will beg to acquaint you, that this oleous friction of Dr. Joseph Alcaraz, is not by any means a new mode of treating the yellow fever; I was an eye witness of its being put in practice eight years ago by the late Dr. Douglas White, a surgeon in the British Navy, and, at that time, of his Majesty's ship Scipio, on the West-India station. The said gentleman was passenger in the Quebec frigate, of which I was surgeon, from Jamaica to Portsmouth, in the year 1797, and I had frequent opportunities of knowing his sentiments on the subject, which he placed implicit confidence in. From an experience of five years and upwards in the West-Indies (and at the time that fatal disease raged with its greatest violence) I will presume to say, that the oleous friction could never be depended on, and that patients trusted solely to its specific qualities would inevitably sink. It will most certainly prevent the admission of air to the surface, and by that means assist in promoting a diaphoresis, which in the first stage of that epidemic malady is generally a very favourable symptom.

I am, &c.

R. WILLIAMS, Surgeon, Royal Navy.

*H. M. S. Northumberland, off Ferrol, Nov. 10, 1804.*

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## *To the Editors of the Medical and Physical Journal.*

Gentlemen,

A Remedy has been proposed in the Medical Essays, for the relief of patients labouring under spasmodic colic, attended with obstinate costiveness; and although some advantage has been ascribed to it, a single case never came within my knowledge of its having been tried, before that which I am now going to relate. The remedy I here allude to is, after having got the patient out of bed, to make him walk on a cold damp floor, and to throw cold water on his feet, legs, and thighs.

Several months ago I was called to see Mrs. Lock, ætat. thirty, of healthy habit; she complained of a violent pain in the umbilical region, extending downwards; described the sensation of a twisting and burning, and had not been at

at stool for more than thirty hours. Her disorder she attributed to a bit of ox-tripe which she had eaten a few days before, and which, she said, she was sure she had not digested. Her pulse was frequent, and a considerable degree of pyrexia with violent retching had come on. I immediately gave her twenty grains of ipecac. with a view to remove the indigestible substance; but this, instead of affording any relief, increased the existing symptoms. I then gave her the mixtur. salin. with a few drops of the tincture opii in each dose; an emollient clyster was given every three hours, and the abdomen fomented. The clysters were returned unchanged, and gave no ease. The pyrexia was now in a great measure diminished, and I tried alternately strong purgatives and more stimulant injections, but with no greater success. The cathartics were almost immediately rejected, and the clysters were returned without producing the least discharge of fæces, leaving behind the most exquisite torture. I ordered the patient to sit over the steam of warm water, applied a blister to the abdomen, (though from the latter I did not expect much benefit) and gave her small doses of the ol. Ricin. combined with the aq. menth. every half hour, adding to each dose ten drops of the tinct. opii. The dose of the tinct. opii was afterwards increased, before I could procure the least respite of ease, from the violent irritation in her stomach and bowels, which had been produced by the use of the cathartics.

I frequently found in this complaint, that purgatives of every kind had failed to produce stools, until large doses of the laudanum had been first administered; but here it only gave temporary relief, and the subsequent use of purges was alike ineffectual. Thus, after having had recourse in vain to all the methods I could devise to produce a stool, did my wretched patient drag on eight days and nights. In the mean time, I should gladly have availed myself of the advice of Dr. Wavell, physician, at Barnstaple, a gentleman whose experience, literary and professional knowledge, and urbanity of manners, peculiarly calculate him for the importance of his situation, but business of an urgent nature had called him to London. I recommended some of the neighbouring surgeons or apothecaries to be called in, but neither my patient nor her friends would listen to it. This confidence in me, who had been only a very short time in practice in this place, instead of gratifying, made me the more unhappy.

The ninth morning after my patient had been seized, had now arrived, and brought with it appearances of a very distressing and alarming nature; her countenance was now very much emaciated, her breath fœtid, pulse small and intermittent; had convulsive hiccoughs, and clammy sweats. The violence of the pain still continued, but the fæces were not vomited, and these were the only circumstances that were not very unfavourable. I had heard much of the benefit derived from swallowing leaden bullets and quick-silver; but so strong was my prejudice against this practice, that I could not prevail on myself to make trial of it, and determined on the application of cold to the lower extremities. This was to me an experiment attended with much hazard, for had not my patient recovered, after undergoing an operation never before heard of in this place, the sapient sneer and significant shake of the head of some of my medical brethren, together with the vulgar prejudice, would have ascribed her death to my temerity, and passed judgment upon me.

After having with much difficulty, though assisted by two women, got the patient out of bed, I supported her to the next apartment, and made her walk barefoot over the floor, which had been previously spread over with table cloths just taken out of a tub of cold water; I also dashed cups of that fluid with some violence against her feet, legs, and thighs; within five minutes, instead of becoming weak by being taken out of bed, she felt stronger, and able to move with less support, and her strength kept gradually increasing; in fifteen minutes a severe griping pain came on, which continued for about ten minutes longer, when she was happily relieved by a very copious discharge of fetid discoloured fæces.

Though very much weakened from this discharge, she said she fancied herself in heaven; but this by no means removed my fears. The extreme debility which came on, her sudden relief from pain, the fetor and colour of the discharge, joined to the state of her pulse, made me suspect all was not right. I got her into bed, ordered her some sago, which, with the exception of a little gruel, was the only food she had taken from the commencement of her complaint; to the sago was added some port with the tinct. opii. The cort. cinch. combined with the rad. rhei, was given, and I found my fears were groundless; for she recovered in a very short time.

Before I would take the liberty of requesting a place for this case in your no less amusing than instructing publication,

tion, I determined to give the method some more trials. In this part of Devonshire, cyder is particularly abundant, and consequently the Devonshire colic is no rare occurrence. Whenever habitual costiveness attended this disease I used the application of cold to the feet, and it produced the desired effect; before I was convinced of its efficacy I should have expected more benefit from the warm pediluvium, but now the former has my decided preference.

The stimulus of cold applied to the feet is conveyed to the intestines, and produces downwards their peristaltic motion; this I conceive to be the modus operandi. It is well known that the unusual exposure of the feet to wet or cold often produces griping and diarrhœa; the erect posture also and motion which the patient uses, no doubt, assist in the operation of the remedy.

I am, &c.

*Braunton,*
*Nov.* 9, 1804. J. RYAL, late Surgeon of the Royal Navy.

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## *To the Editors of the Medical and Phyfical Journal.*

GENTLEMEN,

CONSIDERING the great advantage I have myself derived from the many practical remarks contained in your valuable Journal, I think it would be highly culpable and ungrateful in me, in not giving my mite of information to my brethren, and throwing some light upon the cure of a disease which hitherto has baffled the skill of the physician and surgeon. Few, and few indeed, are the cases upon record that have been successfully treated; however, a case which I am about to mention, I trust will tend to convince the medical world, that such a disease as the Empyema is curable, especially when the constitution is in such a state as will favour the performance of an operation.

Thomas Poney, aged nineteen years, was admitted into the Royal Hospital, Deal, towards the latter end of the month of October, 1803; upon his admission he evidently laboured under all the symptoms of pneumonic inflammation, with the exception of that dull obtuse pain which the generality of patients labouring under the same disease for the most part complain. He compared the pain to a sword being run through his chest; he could not lay upon his right side, and even chose laying upon his back in prefer-

 ence

ence to the left; the pulse seldom fell lower than 180, and never lower than 120; was extremely weak, and gave a sensation exactly as if the coats of the arteries were contracted. His appetite had quite forsaken him, and a little milk formed the chief part of his support. Previous to his admission, venesection had been carried to great lengths, and we were extremely careful how we employed the lancet; he expectorated mucus very freely, but at no one time could we ever detect the least signs of pus. This certainly encouraged us very much, and urged us at that time to form rather a favourable prognosis; blisters to the scrobiculus cordis and back were prescribed, which seemed to allay for a time the pain, but which, after a short period, returned with redoubled violence; chalybeates and digitalis were also administered, but without any beneficial effect. The pain gradually decreased, at last entirely left him, but the cough and hectic fever were far severer than I ever remember to have seen in a truly formed case of phthisis pulmonalis. All our hopes of cure were now given up, and the patient was evidently going to enter that undiscovered country from whose bourn no traveller returns, until, about the beginning of February, 1804, he informed us that there was a lump (using his own words) upon his left side. Upon examination the tumour actually fluctuated, and of course our minds were then made up as to the nature of the disease. Emollient poultices were immediately ordered to be applied to the tumour, and their application was continued for three or four days, the swelling evidently increasing every day in size, and becoming much softer. The operation was now thought adviseable; and the man not having the least objection, it was accordingly performed. The incision was not made where it was most adviseable that it should have been made, on account of the most depending part of the tumour being seated on the inferior part of the rib, the objection of course was the fear of wounding the intercostal artery; the incision being accordingly made upon the superior part of the ninth costa and the pleura divided, about six pints of pus flowed out. The patient's strength failing him very much, in the orifice of the wound was placed a small plug of lint, and the parts were again ordered to be poulticed. The operation having been performed in the morning, upon visiting him in the evening, and removing the poultice, and afterwards the plug, another quart came away; a febrifuge opiate was administered; and upon seeing him the following morning we found him as well, nay far better than what we expected;

pected; he had passed a very good night, and the pulse had sunk at least 60, being at the time of operating 170.

Chalybeates were now given pretty freely with the addition of an antimonial bolus, and the patient was evidently mending rapidly until about a month after the operation, when on a sudden he was attacked with a violent pain in the chest, dyspnœa accompanied with a quick and rather a full pulse, and, in short, all the symptoms of inflammation seemed to have returned. Fortunately, however, these symptoms all disappeared upon his losing ten ounces of blood; there was still a very great discharge from the wound, but the matter was not so thick in consistence as at first. There was no alteration in the patient whatever for about six weeks or two months, when suddenly there appeared another abscess forming, about two inches from the wound; this was poulticed as the last had been, and was opened exactly in a similar manner; this opening was a far more desirable one than what the former one was, as being situated below it, it was of course far more dependent. The discharge from this last made orifice was more abundant than what was produced from the other one, and the patient seemed to be far more relieved by it; both wounds went on discharging, but the quantity abated every day. The patient was now able to walk about the ward, and by his own account was much more corpulent than he had been previous to his illness. It was now thought adviseable to send him home, that he might enjoy the benefit of his native air; he was accordingly invalided for that purpose, and was discharged from this hospital about six months after the operation had been performed, with only a very thin sanies oozing from the lower wound, the upper one being perfectly healed.

### *Remarks upon the foregoing Case.*

It must appear obvious to every one, that the success which attended the performance of the operation was owing in a great measure to there being no organic affection of the lungs, as the patient, from his admission into the hospital until his discharge, never expectorated any purulent matter, consequently the disease must have been confined to the pleura, most probably solely to the pleura costalis. This case will also tend to shew, that where the inflammatory symptoms do not yield readily to the lancet, and that when the practitioner has the smallest doubt that the disease has terminated in suppuration, it is a duty incumbent upon him to examine very attentively the pati-

ent's thorax, to perceive if there is any swelling; and should he find that to be the case, however small that swelling may be, the sooner the operation is performed the better, as I am well convinced that many patients' lives might be saved if this plan was more generally adopted.

I am, &c.

W. SHEARLY,

Member of the Royal College of Surgeons in London.

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## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Flatter myself, that amongst the extensive circle of Readers of your very valuable miscellany, I shall find some practitioners of observation and experience, who will endeavour to investigate more satisfactorily than has hitherto been done, the origin, nature, and cure of a disease, which appears to me highly to merit the attention of the profession; not only because it has already excited very little of the attention of medical writers, but also, because its occurrence appears to be daily becoming more and more common. The disease to which I here allude is best known by the appellation of "The Ring-Worm in the Head."

It is a fact, I believe, not generally known, that this disorder is more dreaded in the schools about London, than any other epidemic; its origin, natural mode of communication, and cure, seem all to be involved in equal uncertainty.

The general opinion of those, who have endeavoured to find out the antiquity of this disorder, is, that it was imported from India, not more than twenty or thirty years ago; and what appears to favour this opinion, is the concurring testimony of schoolmasters, that Indian boys are more subject to it than the natives of this island; but whether it is merely a local disease, or whether it depends upon a disordered state of the whole system, so as to require internal medicines for its eradication, is a question which has not yet been decided; neither has it been ascertained whether the infection is communicated by bodily contact, or by the inhalation of air which has been respired by the disordered person, or by cutaneous absorption

tion, &c. These are points, which I mention not with a view of being able to clear them of their difficulties, by any observations which I have myself made, or any information which I have received; but because, by a public notice of them, I may induce some persons of superior talents and greater experience, to prosecute that inquiry which may ultimately benefit society, and enrich the present stock of medical knowledge. I shall, however, take the liberty of describing the "Ring-Worm of the Head," in its different stages, as clearly as I have been able to ascertain them, and then enumerate the different applications which have been put in practice, making such remarks as may tend to fix their comparative merits, provided the enumeration of *inefficacious* applications may be considered as steps towards the discovery of efficacious remedies.

I need not, it is presumed, premise any thing respecting the nature of a *common* ring-worm, which different parts of the body are liable to, for it will generally yield to any of the common astringent applications to the affected surface; but inasmuch as a ring-worm of the *hairy scalp* will not yield to the same treatment with that on other parts of the body, may it be considered as a different species of the same genus?

Most usually the first appearance of a "ring-worm of the head," is that of a small circle of redness, from the size of a half guinea to that of a guinea, and red only at the circumference, which comes on very suddenly, and occasions the hair to separate at the roots from the slightest touch; this circle increases somewhat in diameter by degrees, and contracts a branny scurf, which constitutes the disorder.

It has been asserted, that animalculæ under the cuticle are the cause of this disorder; but a clergyman of my acquaintance, who, from having a numerous and respectable school, is much interested in the discovery, has made very accurate examination with a microscope, and must have detected *motion*, had there been any living animalculæ; but the result was, that no such cause of irritation existed.

When one circle has made its appearance in a child's head, (for I do not find that adults are ever affected with the disease, nor are girls so subject to it as boys) it may be expected that other similar circles will appear in a short time, on different parts of the head, till they reach one to another, and thus gain possession of the whole hairy scalp:

scalp: when the original circle has considerably enlarged itself, and others have broken out, a confusion follows by means of the intersections, and unless the disorder be subdued, glandular swellings will ensue, and sometimes ulcerations.

On inquiring of my friend before alluded to, whether any symptoms ever precede this disorder, which may be considered as indicative of its approach; I was informed that a paleness of countenance, attended with a loss, or at least a diminution of appetite, so frequently gives notice of its approach, that he has many times pronounced his apprehension, that Master *Such-a-One* was going to have a ring-worm, which has shortly afterwards proved to be the case. This prognosis has not, that I know of, been noticed; perhaps not known to any medical writer; and, therefore, deserves to be more minutely attended to by those who undertake to ascertain the class in which this disease ought to be ranked.

In attempting to cure this disorder, not only have different medical men differed widely in their modes of treatment, but the same person has been under the necessity of trying various applications successively, before the end could be accomplished; which empirical kind of treatment has left him in the dark, as to what particular application proved of the greatest service, or whether it was the succession of different applications which jointly effected the cure.

When a practitioner is applied to for curing the disease in question, who makes no distinction between it and a common ring-worm of any other part, he most commonly applies a solution of sulphate of zinc in rose water, which lotion, though applied at a very early period, very seldom stops the progress of the disorder, and, in almost every instance, fails of effecting a cure: after the astringent lotion has been applied for some time, the *ung. picis* is perhaps recurred to, the effects of which appear to be nearly the same as those of the former application. At length, when much time has elapsed in fruitles efforts to cure the disorder, the hair is taken off, and the head shaven, as the "dernier resource," and blisters and plasters of Burgundy pitch have also been applied: this supposes the disease to be merely local; but from what information I can collect, topical applications *alone* have seldom been found sufficiently powerful to effect a radical cure.

It

It would be improper to mention *names* in a paper of this kind, which is principally intended to induce further inquiry into the nature and cure of the "ring-worm of the head;" otherwise I could refer to the practice of a gentleman, who uses *internal* medicines as well as *topical* applications, and, perhaps, with more success than any of his cotemporaries. About five years ago, a school in the confines of London had not less than sixteen young gentlemen infected with this disorder at the same time; in whom, the applications above specified, besides some others not worthy of particular notice, were resorted to without success, but were ultimately cured by the attention of the gentleman just alluded to. The treatment was thus: The young gentlemen had their heads shaven every four or five days, and took powders of Æthiop's mineral, sulphate of kali, and calcined magnesia twice a day, whilst the ung. hyd. nitrat. was daily applied over the bare head at bed-time, and washed off the next morning with a piece of flannel and soap-suds. This treatment rigidly adhered to, the diet in the mean time being light, the disorder was eradicated; and this treatment has in other instances since been found equally successful, though it must be confessed, that three or four months usually elapse before a cure is effected. It may not be amiss here to add, that the school in which this disorder occurred, was remarkable for cleanliness, regular exercise, airy rooms, good bedding, and proper diet; and that there was a limitation in their number of pupils. Other schools have been equally infected with this disorder, inasmuch that the master of one, which I have heard of, not long ago, changed all the bedding, from an idea that the contagion was propagated by it; and another declared to his apothecary, that he had sustained a greater injury from this complaint than would be repaired, to use his own expression, by "a hatful of gold."

If what I have advanced should be deemed destitute of arrangement or inconclusive, let it be considered that the want of sufficient experience in the disorder in question, apologises for my not offering any thing more conclusive at present; but I trust that the candid reader will at least allow me the credit due to my intention of calling forth the attention of men skilful, as well as more experienced heads, to a subject, which, in my opinion, greatly deserves the investigation of medical research.

The concluding remark, which I must not omit to make, is,

is, that the growing again of the hairs may be considered as a criterion of approaching health.* I am, &c.

ROBERT LOW,
Member of the Royal College of Surgeons.

*Tavistock Row, Covent Garden, Oct.* 18, 1804.

P. S. I shall, with your permission, avail myself of your next Number, to describe a portable electric machine, very convenient for medical purposes, which was invented some years ago by my brother-in-law, the Rev. William Pearson, and has since been somewhat improved by myself; I intend, also, if I have time, accompanying it with some cases, in which I have applied electricity with great benefit.

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## Observations on the Temperament and Diseases of the People inhabiting the Highlands of Aberdeenshire. By Mr. Tuaam Peaal.

FEW are the diseases that rage among the inhabitants of the Highlands; I believe they enjoy a greater share of health than falls to the lot of those of any other nation. This can only be the effect of temperance and regular excitement; the want of effeminacy of manners; moderate exercise; a simple and regular regimen; a pure air; a certain serenity of mind, in being less agitated by the anxious cares of commercial life, which distract the thoughts, and dissipate the animal spirits of those, who live in the lower parts of the country, where traffic is carried on to a much greater extent. Both men and women in the Highlands have a well regulated deportment, which excludes many moral evils or vices that lay the sure foundation from whence proceed a fatal train of physical evils, both incidental and hereditary, that insensibly sap the constitution, and by quick degrees bring the unhappy victims of them to a premature death. In this way I presume their advantages above others, in point of health, may be accounted for. There may be others of a more private and domestic nature, with which we are not so well acquainted, such as the tone and harmony of the passions, whose operations are only seen to advantage in the obscure

* The Editors consider Mr. L's communication as a very important one. They believe the disease to be contagious, and a disease of the hairs, which may be cured by eradicating them. Ed.

scure recesses of social life; for it is well known that these have a mighty influence on the animal œconomy, and according to their movements either cherish or destroy the functions of life. In general, I believe, they are in a great measure free from those convulsive operations of passion that enervate the animal frame, by being removed from that luxury and dissipation, that lust of avarice and ambition, which so easily kindle the soul into a flame, and shake its frail companion to the very base on every disappointment it meets with from the jarring collision of opposing interests. On the contrary, by having few desires, and fewer opportunities of gratifying the corrupt propensities of nature, they are consequently exempted from the evils those unsatiable appetites uniformly bring; they may be said to live to nature, and therefore enjoy the advantages she brings to all those who follow her wholesome dictates.

Having premised these introductory remarks, I shall begin first with considering the female sex, whose temperament differs considerably from that of the male, owing to the different conformation of their body, mode of life, and education.—They are of a smaller stature than the male; some of them have a strong muscular system, while others again are thin, and have rigid fibres. In general, they are never corpulent; many of them are very ruddy complexioned, but those that are advanced in years are rather swarthy. Their bones are for the most part strong, and well formed; they abound with a large proportion of blood, and their catamenia usually continue three days. They are very patient under suffering, and are very seldom violently affected with anger, or talk much without a meaning. From want of experience and observation, their reasoning faculties and knowledge must be defective. It is only by being conversant with different objects that our ideas are formed, and unless we be surrounded with objects capable of exciting perfect ideas, our reflexion, the operation of the mind, and the retention of ideas, will be but weak, and therefore the faculty of discerning between ideas comparatively small. This is the reason why their knowledge is so much upon a par, and from the want of ideas, and improvement of the mind, female judgement is not so very perfect as the male, who receives a better education; which draws out to view every latent virtue and perfection which would never make their appearance without such help. They are very susceptible of love, good natured, and bear love slights with the greatest fortitude. They endure the vicissitudes of the climate surprisingly, for

for it is no uncommon thing with the women to be going barefooted, and washing their cloaths, when the ground is covered with ice. Some of them are addicted to hysteria; this disease is more frequent however with old maids than young females. In the Highlands, the women when with child take a good deal of exercise, which is a means of preventing sickness, vomiting, and ischuria, so frequent among pregnant females of the city. Abortion is very unfrequent, as is also laborious and preternatural labours. Laborious labours, however, do sometimes occur, and are for the most part owing to the bones of their childrens' heads being very much ossified, and large. Weakly women have often easier labours than the strong and robust. The reason is obvious, the bones of their childrens' heads are not so strong, they more easily mould themselves to the capacity of the pelvis, and the parts are not so tense. The Highland women when with child, are very healthy, and they always nurse their own children. They give them however too long suck, and it is not uncommon with them to continue nursing until they be with child again. But when this does not occur, they will give them suck for one year and a half. They commit another error in giving the child suck too often; this is common with nurses every where. Whether it be owing to their having a pleasure in giving it, to the milk stimulating their breasts to have a discharge, or to still the child's crying, I cannot tell; but it would tend much to the child's health to regulate its instinct in this particular, and to give it suck only at stated times. By giving it frequently the child's stomach becomes gorged with it: he then sickens; which increases until he vomits it. When the mothers think their childrens' stomachs will bear it, they give them milk pottage (milk boiled with oat or barley meal) twice or three times a day, which is a very proper food, when given in moderation. They generally give them plenty of airing, which is of great advantage to children, as it makes them strong and hardy. When the child becomes sickly or unwell their only cure for it is whisky punch, which is also employed when there is a scarcity of the mother's milk. The weaning brash does not occur so often in the Highlands as in the city, where it is very common, and frequently terminates in rickets. When diarrhœa happens to children in the Highlands, the principal cure is boiled milk and eggs, inflammed whisky, or whisky punch, which is also employed in the colic of children. Disorders of the primæ viæ and intestines, form the largest portion of those which affect

affect children in the Highlands. The food of children in the Highlands, after they are weaned, does not differ much from what is used by their fathers. It is principally of a vegetable nature. Milk, eggs, butter, and cheese, are however much used in some parts. Corn meal boiled with water into pottage is frequently used for breakfast, dinner, and supper. It is boiled very thick, and supped with milk. Sometimes for dinner greens or kail are used. In ancient times, artemesia was boiled with water, and used for dinner with bread as a substitute for kail. This was a dish which the Highlanders were very fond of, and what agreed well with those who were accustomed to it. For supper, sowns, pottage, milk and bread, or boiled potatoes are often used.

There is no doubt that this simple aliment used by the Highlanders, joined with exercise, produces that particular temperament, which so remarkably characterizes them. They become strong and hardy, but are less irritable and sensible than those who live upon animal food; hence they are less subject to diseases. Too great an irritability or tenderness of the constitution, subjects to disease upon the slightest excess or difficience of the accustomed impressions; this is not the case with the Highlanders, they can bear fatigue, cold, and abstinence from food and drink without throwing them into disease, so that the excitement or vitalment is increased or diminished without affecting the vitality so much as to produce even predisposition.

Until of late years the knowledge of the Highlanders was very much confined, their education consisting chiefly in learning to read; but this reading was not extended to such books as could improve the mind. The Bible, and a few school books, formed all their library; and after they could read, these were only studied at leisure hours. It requires reflection before reading can be a rational amusement to the human soul, and it requires a good deal of reading and application, which those who follow laborious work have seldom time for, before they become acquainted with the learned and illustrious dead, or the enlightened living. But what principally tends to form the temperament of the Highlanders, is the climate, and their pursuits, being almost always without the house, tending cattle, or employed about some rural affairs. This produces in them great muscular force; and as the air is generally pure, and free from noxious exhalations, they are not subject to the diseases arising from impure air.

Although they have not many opportunities of acquiring knowledge,

knowledge, or arming themselves with maxims of prudence and reflection, yet their minds are open to improvement, and they have a perfect knowledge, even to scientific precision, of such things as come within their sphere. They have a desire to reflect upon such things as pass under their review, are very social, and seldom quarrelsome; but when once provoked they are very fierce. The colour of their hair is various. We meet with black, umber brown, light umber brown, red, and light red. The colour of the iris of their eyes is also various, being different shades of black, brown, and light blue. Their temperaments are however much changed when they dwell for some time in the city, and arrive at the dignity of a Ballie or Provost. By this we see the difference which a change of eating, drinking, want of exercise, and a more cultivated state of mind, produces on strong natural talents. Instances of longevity are very common in the Highlands, both among the male and female sex; few of them die until they be fourscore, unless they have been much weakened by repeated attacks of disease. And those who chance to remove to the city in their younger years, unless cut off by fever or some contagious disease, live till they be aged sixty years.

It would be beneficial in practice to be acquainted with the different temperaments of individuals, and yet there remains great uncertainty about their diagnosis and arrangement. Two practitioners would give a different name to the temperament of the same individual; which has been the occasion of my giving over mentioning the temperament of the patient when I am drawing up a case.

But some time ago I was led to adopt a different arrangement, by an endeavour to find out the temperament of a reverend reader of sermons not far from Aberdeen, who had a strong muscular system, ill-looking countenance, weak memory and judgment; envious and passionate. The countenance is very often an index of the mind, whatever be the profession. A truly religious and benevolent mind being happy, is always accompanied with an open, free, and cheerful countenance. Professional and studious men are more under the influence of intellectual enjoyment and suffering than any other class. "The man who is benevolent, wise, and courageous, possessing the greatest enjoyment and least suffering, is most happy." Misery is the reverse of this. The effects of each of these states upon the body must be obvious. I have divided the temperaments into four classes.

1. Those

1. Those with a strong muscular system, large bones, and head, without much mental exercise: subject to be affected by those things whose effects depend upon opinion. Of this temperament are most of the laborious, or rustic employment.

2. With a mean degree of muscular strength rather slender, unused to hard labour, tenacious memory; sometimes weak; subject to violent mental opinion; envious; without those graces which constitute the excellence of man. Constituting the majority of the middle class of men; including sometimes professional gentlemen and the clergy.

3. Weak muscular system: subject to violent mental and animal suffering. Among this class are included the sensualist and hypochondriac.

4. Those whose animal and intellectual senses are regulated to form the chief excellence of man; as probity, supported by wisdom, temperance, and fortitude. Of this temperament are many female characters. It is accompanied with a moderate degree of muscular strength, serenity of countenance, and good nature. They possess the greatest enjoyment and least suffering, and are therefore most happy.

All the houses in the Highlands, which are of one story, are built without chimnies; the fire place is at one end of the house, close to the gable wall; the smoke being light, ascends, and passes out at an aperture left in the roof for the purpose; this opening has a small wooden top resembling a chimney; and at one side a piece of board raised above the top of the cubical frame, with a stalk that comes down for the purpose of turning it to the side which the wind comes from, so that the smoke has more liberty to escape; this is a simple contrivance to prevent smoke, and gave origin to the more elegant ones, which turn with the wind. Yet notwithstanding this, when there is much wind, the houses are frequently smoky. Their fuel for fire consists of peat, which is charred vegetables, and consists principally of carbon. The couples and rafters of their houses are covered with an oily bitumen occasioned by the carbonic acid and hydrogen; it very much resembles tar, and has equally as good an effect in preserving the wood from rotting. There is no doubt but the Highlanders inhale the carbonic vapour into their lungs, which would be a drawback upon their health, if it were not for their being so much exposed to the pure air, and their being accustomed to the smoke. The smoke of their houses is

very disagreeable to strangers until they be some time used to it. Their fire is placed on the ground, close to the gable of the house, round which they all sit; the heat is very strong, it spreads itself all round, and warms the whole house, which without such large fires would be damp and uncomfortable. It is a very general custom with most of the people in the country, and in the Highlands, to smoke tobacco; and very often, when they associate together, only one pipe is employed by the whole of them through the evening; when one has done smoking, another gets the pipe, and so it goes round the whole company. What will be the consequence if one of those are affected with the sibbens? But there are several diseases which may be caught by the saliva, such as scrophula, putrid sore throat, aphtæ, erysipelas, venereal ulcers, &c. It would be better, if they could not abstain from smoking, that each person should have his own pipe; and not only that, but likewise his own spoon, which would obviate the danger mentioned.

They assert that smoking is good for the tooth-ache, colic, heart-burn, &c. and prevents hunger, fevers, and all kind of infection. But whether it has these good effects I cannot take upon me to determine. It certainly hurts the nervous system, and destroys the appetite, and not unfrequently in some produces a complaint in the stomach which they denominate heart-wringing; smoking generally relieves it, but it returns again, if it be not duly repeated. The practice of smoking, now so general in the Highlands, is a deviation from that natural simplicity of nature so common with them. It is to be lamented that they do not recollect that their forefathers lived without it, and that since its introduction among them, diseases have been more frequent. But custom with them, as well as those of the city, triumphs over reason; and as they live in a more social manner, any bad custom is sooner acquired and propagated than in the city. My remarks on smoking or chewing tobacco, will also apply to the immoderate use of whisky.

In process of time it will be no uncommon thing to see them in the country indulge to great excess in all the luxuries of the city, which will have a great effect in diminishing their bodily strength, and be the cause of many diseases to which they were strangers in their more natural state.

It would be happy for them if they imitated the better sort of people of the city in regard to cleanliness. Indeed,

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in this particular they are much reformed, both with respect to their bodies and clothes. The fair sex on Sunday vie with each other in appearing clean and neat, which induces the young men to imitate their example, that they may engross a share of their favour. But in many parts of the Highlands and country, this necessary virtue is much neglected; their skins are covered with a loam of perspirable matter and dust, their beards long, and filled with the same, and their clothes and linen extremely dirty. While this is the case, it is not to be wondered that the itch prevails so much in some parts. For although it depends upon a poisonous virus, which may be denominated soriculi, yet uncleanness increases its virulence and facility of being catched. There is no disease more easily cured. since sulphuric acid has been discovered to be a specific remedy for it. Those are therefore very blameable who allow it to continue on their skins; and many of them are so careless and dirty that they permit the disease to remain, without ever thinking of having it removed, which is an injury both to themselves and neighbours. It is a disorder which gradually spreads over the whole body. The virus enters the interstices of the rete mucosum, raises it into a small pimplar vesicle containing the virus and lymph. A great itching attends, especially when the skin is bare, and exposed to the air; this happens most commonly at bed-time, and is a characteristic mark of the disease. When it continues long upon the skin, it generally produces boils in different parts of the body, and this most commonly in children who are affected with it. I have seen some cases where the feet and head were all in one crust. When it affects children, and allowed to increase without speedy application, it affects, and appears very much like tinea capitis; but in tinea the crust is for the most part white, dry, and thick; this again is more red, and pours out a considerable quantity of thin matter, appears on other parts of the body, and is easier cured than tinea capitis. The itch is a very distressing complaint when it gets into a family where there are a number of young children.

In the city of Aberdeen the itch is less common than in the country, because coals are generally used for fire. Peat or turf in the country. As the coals abound with sulphur they will have a great effect in preventing this disease. I am informed that in the south of Scotland, where sulphury Scots coals are used, that the itch is scarcely known. This

would make us conclude that peat fires rather encouraged this disease.

Fixed air has a very great tendency to produce boils; I once had a case of a young man who had a great number of boils upon his body, which he attributed to his drinking too much mineral water of his own making.

The peculiar temperament of some nations induce particular diseases. The Jews had their leprosy. The Americans, syphilis and gonorrhœa. The Africans, frambæsia. The Scots and Irish, the itch. There is not a stronger instance can be urged in favour of cleanliness than that by Moses when he treats of leprosy, which appears, from his, description of it, to be a species of frambæsia or yaws; which is a disease very infectious, and more liable to be catched than the itch. Moses describes it with great accuracy, and how it is to be distinguished from inflammation, abscess, and other diseases to which it bears any resemblance. The cure he trusted entirely to cleanliness, washing with water, and shutting the patient up to prevent its contagious influence.

Colic is one of the diseases which we most frequently meet with in the Highlands; it seems to arise from various causes, and to consist of different degrees of violence. Sometimes it yields to a stimulant plan of treatment, which they prescribe for themselves, consisting of black pepper mixed with milk, and sometimes whisky. When it does not yield to this treatment in two days, it is of a more violent nature, and attended with great pain and inflammation, which obliges them to apply for medical assistance. Those cases which I have attended, generally yielded to the same agents that are usually employed for the mill-neck or the painter's colic, as blood-letting, castor oil, fomentations, the warm bath, and injections.

I have attended several cases where the patients were affected with spasms of the intestinal canal of a more chronic nature. The patients would sometimes take a little food, but when in any quantity, it was vomited again along with a mouthful of water. When more than a certain quantity of drink was taken, it was regurgitated in the same manner. They complained of a constant sensation of wind rumbling through their bowels, accompanied sometimes with a sharp cutting pain, a wasting of their body, and great dejection of spirit. These symptoms continued with little variation two or three months, but at last increased to continual hiccup and costiveness, which terminated in death. It would be much better for the Highlanders

landers when they drink whisky, to mix it with equal parts of sweet milk, which would obviate its tendency to produce spasms of the bowels, and would make the danger less if any inflammation were present.

Fevers do sometimes occur in the Highlands, but not very frequently; they are generally of that kind called synochus, and occasioned by contagion. You would think that the vigour and hardiness of their bodies would resist its influence, but it is otherwise. When a countryman goes to visit a friend in fever, it is a rare circumstance if he be not affected with it. I have known several countrymen, after they have gone to see their friends in the Aberdeen Hospital, come home affected with fever, which sometimes proves fatal. They are more apt to be infected with fever than those who live in the city, owing to their enjoying the free air. Those in the city are constantly exposed to the effluvia arising from the decomposition of animal substances; they are therefore accustomed to a certain degree of contagion, which renders them not so susceptible of catching fever as those in the country. You observe, in your Essay on Fever,* that there is something in the nature of the contagion of fever which determines it most commonly to produce the same disease. There is always a great similarity between cases of infected fever here; and its action upon the body, in this part of the country, very much resembles cold. Intermittents are entire strangers here.

Inflammation, and soreness of the lips in the cold of winter, and intense heat of the summer, is a common complaint. When this occurs in old subjects, and is neglected or irritated by tobacco pipes when smoking, it sometimes turns into cancer of the lip, a disease very frequent among old men in the Highlands.

We are experiencing the advantage of Dr. Jenner's discovery. Every school-master is becoming a vaccinator. The small-pox can no longer intimidate us. If it do, we have ourselves to blame.

There are a few more diseases which we meet with here, such as stone, hernia, herpes, sibbens, and epilepsy; but I am afraid I have already trespassed upon your patience. I have nothing remarkable to add at present with respect to any of these. The number afflicted with stone in the bladder have decreased one-half, which I suppose is owing to the meal being ground with granite stones. The

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* This paper was, originally, addressed to Dr. Ferguson. Ed.

mill-stones were formerly very soft, and mouldered fast away in grinding, so that a great part of the meal consisted of earthy and sandy particles.

I have tried your sulphat of soda poultice in two cases of ulcerated bubo, with the same good effect as you mention in chancre. They were cured without applying ointment of any kind.

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## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Beg leave to communicate, through the medium of your useful Journal, the following fact relative to the vaccine disease, which seems to throw additional light on this very important improvement in the medical art; and, as far as it goes, to solve the question, whether the small-pox does ever supervene the cow-pox.

Eliza Comer, now aged two years, was inoculated on August 13, 1803, for the vaccine disease, in both arms, with virus procured from the Vaccine Pock Institution, and went through the disease in a perfectly favourable manner, without any pustules except those of the arms; the punctures on both of which rose with large areola around them: this is necessary to premise, in order to elucidate the following case. The small-pox becoming frequent in this town, the mother of the child desired to have her inoculated for it, as she was afraid, from what she had heard, that the cow-pox was not a preventive. Accordingly, to satisfy her, I inserted a portion of variolous matter in the *left arm only*, on the 1st of June last. On calling to see the child, four days after, I saw every appearance of the puncture rising; but expected that it would have died away again, as I have witnessed in other cases of re-inoculation; and my surprize was considerable, on visiting her the sixth day, to find the arm still rising with an efflorescence around it, with symptoms of fever and absorption. On the eighth day, a rash, resembling that which so often precedes the eruption of the small-pox, appeared, covering the greater part of the body, attended with a considerable degree of swelling and fever; the puncture on the arm still rising, and appearing more inflamed and elevated. Under these circumstances, being considerably

considerably alarmed, expecting that the child was about to have the small-pox, and she being costive, I administered a dose of kali tart. and manna; the next morning the mother informed me, that the small-pox was coming out very thick. On seeing the child, I found the face and neck covered with at least an hundred pimples. On examining the arm, to see the state the puncture was in, I perceived that it was sinking, and evidently dying away; and the pustule above it, about half an inch, where she had been previously vaccinated, elevated, with an areola appearing round it. This led me to examine the state of the other arm; and with great satisfaction I perceived that the original puncture there was also risen, with a most beautiful areola around it, exactly similar in its appearance and dimensions to that which had taken place at the time of the original vaccination. The child being again costive, I repeated the kali tart. and manna; and by the thirteenth day I had the pleasure of seeing the appearances on the arms subside, the eruption vanish, and the child recover her former healthy state.

The inferences which I draw from the foregoing statement are: First, that the vaccine virus (or principle) lay dormant in this child's system. This is to be accounted for by the re-appearance of the original vaccine inflammation and areola around the former punctures on the arms; and the eruption, as well as I could distinguish, resembling more those of the vaccine than the variolous disease. Second, that the introduction of variolous fluid under the cutis of the left arm, had the effect of throwing the dormant vaccine principle into sufficient action to repel its admission into the system. And, third, may not the cases lately related of small-pox taking place after vaccination, be referred to the same laws? as it is not unlikely, that the same phenomena took place; for I should have probably considered this case as incomplete small-pox, had I not perceived the state of the original punctures on the arms. And if, on future observation, other practitioners should meet with similar cases, a wide field for inquiry and investigation will be opened; for, I am inclined to think that we are not yet properly acquainted with the pathology of the disease; and it may not be improper to conjecture, if it should be proved in other cases to remain dormant in the system, that the vaccine principle may prevent other contagious eruptive diseases: and I mean, in consequence, to keep a watchful eye over those

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that I have vaccinated, to note what diseases they are obnoxious to, and what they escape.

I am, &c.

*Glastonbury, Nov.* 11, 1804. J. BOND.

P. S. I inoculated two other children for the small-pox on the same day, with some of the same matter, who had been previously inoculated for the vaccine disease, on the same day with Eliza Comer, with some of the same fluid that she was infected with; but in them I could not perceive the least effect. This I think proper to mention, to show that the vaccine fluid made use of, was in a proper state at the time of their vaccination; and also, that in some peculiar constitutions, that are probably originally more susceptible of the variolous disease, it makes more vigorous efforts to enter the system, than in those who are not so susceptible of it; and therefore, that in all, after the introduction of the vaccine fluid, the principle may remain dormant, though not obliged to exert or shew itself.

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*Copy of a Letter from Dr. Coxe, of Philadelphia, to Mr. Ring, dated October* 26, 1804.

My dear Sir,

YOU have my sincere thanks for the additional favors you have conferred on me, by the transmission of the late Treatises on the subject of Vaccination. I received them a day or two past, and have just given them a cursory reading. It appears to me, that you have amply vindicated the honour of the practice; nor can I well imagine, on what principle Mr. Goldson would attempt to overturn the public confidence in it, by a detail of a few, at best, imperfect histories, of both the (supposed) diseases under his care. It has forcibly struck me, from the hasty perusal of his pamphlet, that he can have paid but small attention to the progress of this beautiful affection, and to its various anomalies. He has said much upon the difference in colour between the *natural* and *inoculated* disease, as if this could possibly influence its prophylactic property! What is it in the cow, in fact, but an inoculated disease from the heels of the horse? According to his principles, to insure *perpetual* safety, and not for *two* or

*three*

*three* years only, we had better recur at once to the equine as the primary, and consequently the most efficacious, source. But, if so great a falling off exists between the efficacy of the disease immediately from the cow and that produced by inoculation from the human subject, alas! how dangerously must a large proportion of the rising generation be now situated, from the *increased deterioration* of the infection by some hundred removes from its original stock! After all, Mr. Goldson has built his faith too much upon the early opinions respecting the disease, before it was thoroughly understood; and of course, (as might have been expected, and as he would have discovered by reading) many of them have been proved to be erroneous. With respect to this colour of the pock above adverted to, it is an anomaly no more to be accounted for, than many others which take place in this disease. It is certain, that at times the vesicle will be of a pellucid appearance; whilst, at others, it is nearly of an opaque white, resembling paper: yet, in both instances, preserving the characteristic depression and circular appearance; the virus also being equally transparent in both. In all the cases which have come under my care, and to which, from the interest I take in the practice, I have paid great attention, I have never met with but one instance of the real blue colour. I have, in two or three others, thought I perceived a distant approach to it. As this case serves to evince the variety of the disease, I shall just state the circumstances.

On the 27th of last November I vaccinated a young man, a student of medicine, by two punctures of the left arm (having previously attempted to infect him with some virus of five months old). It succeeded in *one* puncture only; and throughout its course appeared to be about two days *tardy*: thus, the areola did not occur until the eleventh day. The fever was rather high on the twelfth day, when he told me, he found, by examination, his pulse beat from ten to fifteen strokes more in a minute in the *sound* arm than in the other. I could not, however, find any difference on examining it. On the 2d of January I tested him with small-pox; and he has himself since, repeatedly exposed and inoculated himself with only a very slight inflammation of the part occurring. The infection I employed was some on glass, which Mr. G. C. Jenner gave to young Mr. Peale, when he returned from exhibiting the mammoth in England. It was two months and a half old when I employed it. There are some points in the

the preceding case, which, compared with the next I shall state, show the diversity of the disease. I have omitted to say, that by puncture the vesicle was one of the most *oval* I have seen, and of the colour I have mentioned above; of an *opaque white*. On the *tenth* day I revaccinated him from himself, which took effect, and progressed as it ought, the areola commencing a few hours after that of the primary pock.

On the 6th of December, I vaccinated an infant of four months old, with fresh infection (from the case abovementioned) of the eleventh day; though, from its *tardy* progress, it was not above the ninth in the natural course of the disease. I must state, that this child had been previously vaccinated, ineffectually, three times; with recent infection, with some of eight days, and with some of seven months. Both punctures, in this instance, took effect; and though produced by infection from a pock so tardy, it ran an opposite course; a slight fever was perceptible on the sixth day, and the areola made its appearance late on the 7th, or very early on the 8th. On the tenth the areola was rapidly declining. The scabs came off on the 19th and twentieth days. It was on the eighth day, the mother herself called my attention to the pocks, by asking me, what was the matter with them, they had altered so much in colour? They had, from the earliest appearance, a slight tinge of blue, but they had not particularly attracted my attention till the sixth or seventh day; from which time they increased most rapidly, so that now they were of a considerably deep indigo appearance. Had I not known the circumstance, relative to the occasional livid appearance, I should have been very uneasy; but I beheld in them only a beautiful variety of the disease, which I had long anxiously looked for. The mother herself was frightened, as some of the neighbours had told her, they looked as if they would mortify. This child I revaccinated on the sixth day, from herself, ineffectually.

Now, in these two instances, the extreme variety of the disease is well evinced. Infection from a tardy pock produces one of rapid progress; and from one of an opaque white hue is induced the highest grade of blue. How will Mr. Goldson explain these varieties? I cannot. In proof of the mildness of the disease, I may state, that the subject of the last case, during its progress, not only cut several teeth, but had also a most violent cold, which threatened

threatened an attack of cynanche trachealis; yet without any additional increase in the symptoms of the vaccine.

A circumstance in the first case stated, leads me to observe how much attention is essential in this disease; I mean, the *success* of one puncture and failure of the other. Now, had I unfortunately made *but the unsuccessful attempt*, I should probably have thrown away the infection as effete; although I have long known, that it may fail in one instance, whilst it succeeds in another; nay, that the same infection which fails to day, will succeed in the identical patients five or six days later;* and if five or six days, why not at a longer period?

In the first trial of the disease which succeeded in this city, viz. on myself, of three portions of thread deposited in my left fore-arm, about an inch from each other, in a straight line to the hand, the *two* extreme ones took effect, whilst the *middle* one failed;† and repeatedly has the same infection failed in one case, which has succeeded in another. How is this? we are yet in the dark as to many of the laws of this virus upon the animal body. We must resolve it, in the latter case, to a constitutional indisposition; may we be allowed, in the former, to suppose a *local* indisposition to exist? My own case, as well as the first case detailed in this letter, seems to authorize it.

I have within these few days, repeated the *sixteenth* unsuccessful attempt to induce the vaccine in a child. I began with it in April last, when two months old; and have continued at intervals to repeat it, with infection *four* times recent, five times of one day old, once of two days, once of three, once of seven, once of eight, once of seventeen, once of twenty-two, and once of sixty-two days. A spurious pustule was produced on the first and seventh attempts; the infection being recent, and one day old, and taken on the seventh and eighth of the disease.‡ I am hence led to state, that although we may be confident of the genuine nature of our infection, it by no means follows that it will invariably produce the perfect disease. Too much stress has I think been laid upon this; for although spurious infection cannot produce a perfect disease; yet, certainly, by some peculiarity of constitution, or

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* See note, p. 41, of my Treatise on Vaccination.

† See Case I. ibid.

‡ See Case XXX. ibid.

or some early injury, a spurious affection will not unfrequently follow the deposition of the most perfect infection. I have had more than one instance, in which the same infection, deposited the same day, in different persons' arms, has failed in one, produced a perfect pock in a second, and a spurious one in a third.

The chief object, then, of the practitioner, must assuredly be, to make himself acquainted with the real and genuine appearance of the disease, as a standard; a deviation from which should always excite a proportionate suspicion. Had Mr. Goldson adverted to this truth, it is probable he would not have laid so much stress upon the source of the infection first employed. As Mr. G. appears to have never seen the vaccine disease before he practiced it himself, it is very extraordinary that a philosophic curiosity should not have led him to test some of his first cases *immediately*; especially, as he appears to have so great a share of ill-timed scepticism. Six cases, even if better substantiated than his, would bear but a small proportion to, I might now say, the millions who have been shielded by the Jennerian Egis. Were it not a preservative, instead of one solitary *suspected* case, how many thousands might not the adversaries of this invaluable blessing adduce, without fear of contradiction! But "they lie wait privily;" and, by this underhand, insidious conduct, endeavour to destroy the confidence of the public in the practice. The rash assertion of an illiterate or malicious individual, is to overthrow the matured and long experienced judgement of the brightest ornaments of the profession in every part of the world!

In December, 1801, about seven weeks after the introduction of the practice into Philadelphia, I vaccinated my infant son of three weeks old; since christened by the name of Edward Jenner Coxe. He passed through the disease in the most favourable manner. About three weeks from the insertion of the vaccine infection, I inoculated him for the small-pox; and repeated it in a week more. I again attempted it on the 18th of February, with the like unsuccessful issue. In February of the following year (or *fourteen months*; a period after vaccination, at which Mr. Goldson found strong constitutional symptoms) I renewed my attempts; and again on April 29, for the fifth time. January 31 and May 29 of the present year, I again tried the small-pox; and his arm is *now* slightly inflamed by an eighth attempt made on the 20th of the month. In all I have made about fourteen punctures; and always

employed

employed *recent* virus, taken from persons labouring under the natural small-pox, generally very severe. To this, I may add, that he has been exposed to the natural contagion by visiting persons in it; and by being held in their arms for a quarter of an hour at a time, at least a dozen times. Many have I inoculated once, ineffectually; and several two and three times. I have an infant daughter, now about ten weeks old, who was vaccinated at two weeks, and passed through the disease with scarcely a moment's indisposition. The scab was off the sixteenth day; and she, in like manner, has resisted the variolous inoculation of the 20th instant. In the spring of 1803, I tested about twenty persons of different ages and sexes, who had gone through the vaccine, from its first introduction up to the period alluded to. The infection I used was taken from a man who was covered with it, in the natural way. I employed it on them all, in the space of a few days. Of this number, not one escaped evincing the *activity* of the poison. In about one-third, a small inflammation, without any vesicle, continued nearly three or four days, with much itching, and then died away. In an equal number, perhaps, the local affection produced a small vesicle of lymph, which dried away in about six or seven days. But in the third division, a complete pustule formed; which regularly maturated, and from which, as in Mr. Goldson's fourth case, I could have produced the small-pox in as many, I doubt not, as I should have tried it in; provided they had not previously been secured against it. In all these last cases, (and some had two or three pustules, according to the number of punctures made) no constitutional symptoms occurred; and though the pustule was surrounded with an inflamed and hardened base, no confluent pimples attended, but the disease was almost circumscribed as in the vaccine itself. In about one hundred persons whom I have tested, I have not been able to produce the small-pox, further than this slight local affection; and I will ask Mr. Goldson, if he would not consider it very unfortunate indeed, to fail so uniformly, without having the same invaluable cause to assign for it? I must therefore think, that Mr. Goldson might be much better employed, in studying the nature of vaccination, than in starting objections to the practice, founded on a few such imperfect experiments as he details. If he is still anxious to try its efficacy, let him make

make use of your offer, and test some of those who have passed the rubicon under your care.

I observe in your Treatise, and more lately in the Medical and Physical Journal, you have fallen into an error, respecting the greater rapidity of the disease in the Negro, from some imperfect experiments made in Paris. I find Dr. Marshall also admits the same, from a solitary example noticed by him, (Medical and Physical Journal, for January, page 40). The experience I have had in this disease, in the Negro, does not authorise this conclusion. I have not perceived any difference in the progress of the pock, nor in the facility of its communication, between Whites, Blacks, or Mulattoes. In p. 149 of my Treatise, you will find one solitary instance of its rapid march in a black child; in whom the dark coloured scab was completely formed on the eighth day; and on the eleventh, I tested him with variolous matter. On the fifteenth day the scab came off. The like uniformity has, I believe, been generally observed by our practitioners in Philadelphia. As for the infection being procured so early as the third day, by Dr. Marshall, it is a mere accidental variety of the disease, and not so remarkable as the protracted period you mention of 45 days, in a late Number of the Med. Journal. Case 43 of my Treatise, gives the account of matter obtained from a pock in a white child, in ninety-three hours after vaccination. The usual period of the successful appearance of vaccination is three days, before which time I presume we might always destroy the disease by excision or caustic. I presume this would also be the case in your long-protracted one above adverted to; as I suppose, during this period, the infection must be local, and lie dormant. Now, three days compared with forty-five, is not greater in disproportion, than one month or six weeks, (the usual period of the attack of hydrophobia after a bite) and a year or eighteen months or more, which has been recorded. An important deduction I would wish to draw from this, is, that any time between the reception of the bite, and before the actual occurrence of the symptoms, *excision* should be uniformly practiced; as in all probability the virus must here also be local, and lie dormant. The sooner however this is done, I conceive, the better. The operation of morbid poisons, I think, may be much unfolded, by due attention to this extraordinary blessing.

I see, Mr. Goldson has availed himself of the supposed superiority of size of the natural vaccine-pock over that induced

induced by vaccination. This also, I apprehend, is a mere accidental circumstance; I doubt much, whether Mr. Goldson has ever seen a pock on the cow, or in a human subject, of the magnitude of that which I sent you an account of some time ago. The infection, which produced this pock of full an inch and a half in diameter, in a mulatto woman, excited only a common sized pock in another case. It is these variations from the natural appearance of the disease which we must study, in order to perfect our knowledge of this wonderful prophylactic.

I have thus, my dear Sir, encroached upon your valuable time, by a much longer letter than I intended, when I sat down to write. The importance of the subject has however prolonged my communication; and, knowing the interest you feel in whatever concerns it, I trust you will pardon me. If you think it may be useful to communicate these remarks to the Medical and Physical Journal, you have my free consent.

Be assured I am, very truly,

Your obliged humble servant,

JOHN REDMAN COXE.

P.S. I must request your acceptance of the first Number of the Philadelphia Medical Museum; a work I have lately undertaken to conduct here. If you would occasionally enrich its pages by some of the stores of your information, I shall be highly flattered. You will, in this Number, see some remarks on the subject of vaccination; and you will also notice the recommendation of the burnt sponge, from your authority. As we have, in various parts of America, districts afflicted with bronchocele, I hope we shall be enabled to give it a complete trial. You will observe the correction of a mistake of the quantity of the sponge in each troche, which has, somehow, been admitted in your communication to the Medical Journal.

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To the Editors of the Medical and Physical Journal.

Gentlemen,

EVERY circumstance relative to the blue pocks decribed by Dr. Coxe, convinces me that they were spurious; owing to the subject, in whom they occurred, having previously had the small-pox.

1. There

1. There was great difficulty in producing infection.—2. The progress of the disease was uncommonly rapid.—3. The blue pock has in many other instances occurred, in my own practice and in that of others, when a person who has had either the small-pox or the cow-pock, is inoculated either with vaccine or variolous matter.

My account of the greater rapidity of vaccination in the negro is not founded on my own practice; it is, however, worthy of remark, that one very striking instance here recorded by Dr. Coxe, seems to countenance this opinion.

Dr. Coxe mentions an instance, in which matter for vaccination was taken from the arm ninety-three hours after inoculation. I have often taken it still earlier; and the same has been done by Dr. Jenner.

The mistake respecting the number of troches to be made out of the mass directed in the 4th volume of this Journal, is corrected in the next volume, p. 38. The disorder for which they are prescribed, is extremely common in this kingdom, as well as in other parts of the world; far more so than I could have imagined it to be: but those who are troubled with it, generally labour to conceal their misfortune, and endure it in silence, thinking it is of no use to complain.

I once thought it was not perfectly safe for any person to put a lozenge under the tongue when going to bed, as had been the custom in some instances; but I have now some patients who practice it with impunity, and even with considerable advantage; the delicacy of their stomachs scarcely permitting them to pursue any other course.

In a former letter, dated June 4, 1804, Dr. Coxe observes, that vaccination has appeared very opportunely, in order to prevent the ravages of this wide-wasting war from being so severely felt. He laments the lukewarmness of too many medical practitioners; who, without entertaining any doubt of the efficacy of the cow-pock, submit to inoculate for the small-pox, in compliance with the solicitations of the vulgar and ignorant part of the community; and, he might have added, with the dictates of their own sordid self-interest. He thinks such conduct criminal in the highest degree; and declares, that nothing should tempt him to follow their example.

He says, "I have lately succeeded in exciting the cow-pock with a scab nine months and three weeks old; the longest period, as far as I know, in which it has proved successful.

successful. This discovery of Mr. Bryce, respecting the scab, is of vast importance; as it will enable us to preserve the infection amongst us, I hope, without difficulty.

"In one of the last Numbers of the Medical Repository, I have given an account of a very remarkable vaccine pock, as to size. It was at least an inch and half in diameter, with the perfect character of the disease; yet, not accompanied with any extraordinary symptoms."

To this valuable communication from Dr. Coxe, I beg leave to add the following interesting letters from other Correspondents.

"Sir,

"Having been disappointed by some cow-pock matter I lately received, I take the liberty to request you will send me two or three vaccinators charged with that virus.

"I have every reason to be satisfied with the security which vaccination affords against the small-pox; having repeatedly inoculated those with variolous matter, whom I had vaccinated two and three years before, without its producing any other effect, than a local inflammation on the arm.

"As I am writing to one who interests himself so much on the subject of vaccine inoculation, and who may be numbered amongst its most strenuous and able supporters, I trust I shall be excused for pressing on your attention, a practice I have used for several years as a test of constitutional affection; and which is treated of at large, in a pamphlet written on that subject by Mr. Bryce of Edinburgh, and published in 1802. I must acknowledge, I do not attribute all the failures which are said to have occurred, in the security of vaccination against the small-pox, to the virus having produced a spurious pustule, or to the irregularity of its progress; but sometimes to the circumstance of its having excited a local effect only; which has not been succeeded by a correspondent constitutional action, on which alone the security of the patient depends. The same occurrence is continually observed in the inoculation of the small-pox; for repeated experience proves, that although the pustule on the arm be accompanied by an extensive surrounding inflammation, it is not an invariable proof of the absorption of the variolous matter into the system, from the patient's having afterwards taken the small-pox by contagion; *many instances of which have fallen within my own observation.* The only circumstance, which in

in that disease can be considered as a test of constitutional affection, is its being followed by a variolous eruption; unless indeed the same practice should have been adopted, which I am recommending in the cow-pox. The vaccine disease however being followed by no eruption; the febrile action being in general so extremely slight, and having nothing to characterize it; and considering the areola on the inoculated part, although a strong, yet only a presumptive evidence of security; I have, long before the publication of Mr. Bryce's Treatise, availed myself of what I consider so decisive a test of constitutional affection, that I scarcely ever omit it. About the sixth day, when the vesicle on the inoculated part is formed, or about three days before the areola may be expected to come on, I insert the point of a lancet into the vesicle; and with the lymph which exudes, I inoculate the other arm, and as many other patients as may be present in the same state of forwardness. The progress of the second inoculation is very dissimilar from the first; it proceeds more rapidly through its stages; exhibiting an areola at the same time with the vesicle on the other arm; so that upon examining them on the ninth or tenth day, they will be both found in an equal state of forwardness, the only difference being, that the second is of a more diminutive appearance. I consider this as so decisive a test of constitutional affection, and one which scarcely ever fails to take place, especially in children, that unless it does, I never venture to warrant my patient's security against variolous infection; but advise the inoculation to be repeated at a subsequent period. Having acted in this cautious manner for several years, and attending particularly to taking the virus at the earliest period possible, I have had the most satisfactory proofs of its efficacy in resisting the contagion of the small-pox.

"I hope, Sir, you will excuse the freedom I take in offering you these observations. If they are of any importance, I know no one, under whose sanction they will be more generally attended to; and if unimportant, I presume you will readily pardon an intrusion, which proceeds from an anxious desire to establish the credit of vaccination on the basis that I am convinced it merits; and which, with proper precautions, it must finally attain.

"I am, &c.

"T. Hugo."

*Crediton, Nov. 8, 1804.*

"To Mr. RING.

"Sir,

"While I admire the very commendable zeal you have exercised for the interests of humanity, with respect to the cow-pock, it affords me a very sensible pleasure to have it in my power to adduce the clearest evidence, as far as one instance can go, of the truth of your position, stated in the Medical and Physical Journal for September, 1804, p. 282; that an insusceptibility of the small-pox at one period, is no proof the party will not be liable thereto at another.

"Several years before the cow-pock was introduced, or even spoken of here, I inoculated two children of Mr. White, of the Excise, then residing at Huntly, now at Frasersburgh; one a boy, the other a girl. The latter received the infection, and had the disease in the usual way; the former resisted it. He was again inoculated with recent matter from his sister's arm, but to no purpose.

"In the year 1801, Mr. White having three other children, wished to have them vaccinated. On this occasion I stated to him, that although his son had twice resisted infection under one state of the system, he might not under another; and that he ought to have a chance with the other children. The father's reply was, that he thought him secure against all attacks; but if I was of a contrary opinion, he left it with me to determine.

"He was therefore vaccinated again, together with the three other children. These went through the regular cow-pock; but no impression was made upon the boy, beyond what the scratch of a pin would have produced; and even this speedily disappeared.

"Determined to make a last effort, I again vaccinated him with matter taken, on the seventh day, from the arm of one of his sisters; which, at length, succeeded: the symptoms were mild, and his recovery perfect.

"His age, at the time of the first inoculations, was about two years; at the second, between six and seven. He was each time in good health; and perfectly free from eruptions.

"If the above case can be of any use, to prevent parents from placing too great a confidence in what may, at best, be only a doubtful security, it is much at your service. It cannot be in better hands.

"I am, &c.

"Alex. Thompson, Surgeon, N. Britain."

*Huntly, Oct. 20, 1802.*

The following is an extract of a letter from Mr. HECTOR, Surgeon, of Aberdeen, dated November 14, 1804.

"THE matter I received from you, on vaccinators, answered very well; and I have just now finished inoculating the second parish in this neighbourhood, in the course of the summer. In the former there were 364 vaccinated; in the latter nearly 700. My private practice has been in proportion.

"There is, besides, an institution in this town, at which the Hospital surgeons and some others attend; where, I am informed, nearly a thousand have been vaccinated this year.

"The benefit and utility of the practice to mankind will not, I believe, now be doubted by the most incredulous; and although the progress of the infection through its different stages, in the constitution, is never severely marked, it has evidently, in many instances, a beneficial effect; by carrying off the cause, be what it will, of indifferent health in children. I have often seen very tender and weakly children, of different ages, arrive at such a state of health after vaccination, that the parents themselves, although differing in opinion on other points, respecting the efficacy of the practice, have candidly acknowledged this good effect."

The preceding letters are too valuable to be suppressed. The proposition, however, of a second vaccine inoculation, appears to me too general. I am fully convinced, that every person who has the genuine and complete cow-pock, is secure from the future infection of the small-pox, as far as he can be rendered secure, either by vaccine or variolous inoculation. It may, nevertheless, be an useful hint to those who are inexperienced, and who are not well acquainted with the characteristics of the cow-pock: It may enable them to dispel any doubt that may arise, either in their own minds, or in the minds of others. On this account, I frequently practised it in the infancy of vaccination; and Dr. Jenner and others did the same.

I am, &c.

JOHN RING.

*New Street, Hanover Square.*

T.

## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

HAVING in some of the preceding Numbers of your Journal, made observations upon the case in Fulwood's Rents, I take the liberty to offer a few remarks upon that report of the committee, which was noticed by you in your last number. In doing this, I hope that every gentleman who composed that committee, (to a great part of which I owe my present situation) and the respectable characters of whom any mention may be made in my examination of the report, will believe me to be actuated by the sole motive of endeavouring to rescue the character of *genuine* vacciola from the suspicion (which I conceive to be ill founded) of not possessing sufficient efficacy to preserve the constitution from the future infection of the small-pox. The report of this committee must be considered as an important publication, which will be sought after with great eagerness in different parts of the world. Those celebrated characters, De Carro, Odier, Sacco, and other distinguished men, who have been the instruments of propagating the happy discovery through extensive tracks of the globe, will most certainly read with surprize and great concern, the concluding opinion of the committee, viz. "That there seems no reason to question the regular progress of the vaccination in Nancy and Mary Hodges; nor the existence of the small-pox more than two years afterwards in the latter." The great importance which must be attached to this statement, will most certainly excuse any observations which I may make upon any part of the Report; and I assure myself, that the authors will be exceedingly happy if it can be made to appear highly probable, that either the former or the latter part of their statement is ill founded.

Were I to take up this subject as a casuist, I might object to the manner in which the experiments of the inoculations from Mary Hodges were conducted. I might make some inquiries with respect to the instrument used, and the close inspection of the committee at the time of the matter being taken from Mary Hodges, and inserted into H. A. a boy aged eight months, Case 3; and Mary Robins, aged five months, Case 4. The other inoculations being of the second generation, can only be considered as dependant upon the validity of the two first cases. I migh ask hen,

in the first place, what lancet did Friend Morgan use? Was it one furnished to him by the committee; a new one, purchased on purpose to avoid any chance of other matter being attached to it?

Friend Morgan, it appears from the report, had been attending patients with the small-pox, perhaps inoculating others for that disease, (Vide Report, page 10): Did he use any lancet which had ever before been soiled with variolous matter? *

The presence of any part of the committee during the second series of inoculation, is not of any consequence; all the importance of the report attaches to the first series, and rests entirely upon the faithfulness and accuracy of the inoculators, who alone took, and kept, and applied the matter. These are circumstances which must be remarked by every stranger. I know Morgan too well, and have too high a respect for his ingenuousness of character, to suspect him to be capable of exercising any legerdemain in his experiments; but this gentleman is not known to all the various characters who will investigate the report, and therefore, arguing as a perfect stranger, or casuist, I might say, there is a defect in the record, for it is only in the mouth of two or three witnesses that every word should be established.

Notwithstanding the want of vigilance, which appears to me to have marked the proceedings of the committee on this most important affair, there is certainly a very great shew of it, in exhibiting copies of the register of the case, when under inoculation for the cow-pock; yet, what end can it answer to exhibit the cases from which the original inoculation was made? If the committee had exhibited from the register, cases of perfect vacciola by inoculation (with clean lancet) from Mary Hodges, they would have taken the only perfectly tenable *extra se* ground on which to erect their conclusion, that in Mary Hodges the "progress of vaccination had been regular."

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* I remember it once happened to me, that I had ten or twelve subjects to inoculate, when the sun was set, and candles not yet lighted; that I had a perfect case to inoculate from, but I thought the pock was too far advanced; I had no other, and ventured to use it. Inoculating each arm, I made more than twenty insertions of matter. I saw the subjects in a week, and one pock only was produced; the marks of the other punctures were all passed away. I found it had been the third insertion of my lancet which had produced the perfect effect; and concluded that the instrument, in constant use, had had a particle of active matter, dry or hard, on its point; that, on the first and second insertion, it was not yet dissolved; that on the third, it had been sufficiently softened to be wiped off from the lancet and left behind in the puncture.

Their

Their proof, they say, rests on the following evidences: 1st, The register. 2dly, The declaration of the inoculator, who considers the appearances and progress of vaccination to have been perfectly regular and satisfactory. 3dly, The cicatrices or marks remaining on their arms.

The first of these evidences, viz. the register, seems by far the strongest offered in proof of the vacciolation having been complete. The recollection of any officer at a public institution extending to individual cases, (unless there have been something peculiar in them) would afford an instance of capaciousness, and of retention of memory, beyond the ordinary stretch of the human faculty. Cicatrices, not distinguishable from those which are left by inoculation, are produced from other causes, from a wound by a rusty nail, or from any other destruction of integument.

But, respecting the register itself, I see in it marks of vacciola not having yet been perfectly understood; for, at an early period, I find remarked, as a peculiarity, "*no pustules,*" though no pustules is what we regularly expect, and what we find in vacciolation. I have seen "pustules," it is true, and had much anxiety about them; but it was where I had absolutely to refuse the gold which the confiding Spaniards pressed upon me, even when I told them my suspicions. (The opinions in my letter to the Governor Fox, page 54 of your last Number). These pustules, or spurious pocks, were elevated, contained lymph, and had a blossom, but the blossom was not the areola of the cow-pock; it was undefined and indistinct. It is to be feared, that thousands of such degenerated pocks may have been produced in early practice, before the beautiful vacciola was so generally known as it now happily is.

Has Mary Hodges undergone some such partial effect from vacciolation as the young Spaniards, who afterwards suffered so little from the small-pox? If so, she may also have had so imperfect a variola as to cause many of us to think that it was only varicella which was present.

Let not my worthy friend, the respectable gentleman who inoculated the child, conceive that any thing like disparagement is meant in these observations. So late as the year 1801, I had great pleasure in inoculating from a subject so far advanced, that he complained of pain in his arm-pits. Even then, I erroneously thought it a proof of its being a perfect case, though those who have previously had the small-pox, are sometimes known to endure much in this way from the inoculation of vacciola. I inoculated

from him with peculiar pleasure, but had the mortification to produce from him, in that late stage, only pustules or spurious pocks.

If the conjectures of the committee be right, that Ann and Mary Hodges have been perfectly vacciolated; that Mary has since had small-pox, and that Ann also has had it, according to the description of the mother, and the conclusion of the medical practitioner who attended her: If, I say, the two sisters inoculated, one in 1800, the other in 1802, have, now, contrary to the general experience, been found susceptible of any effect from variolous contagion, there must be in their family, as has been suggested to me by an experienced practitioner, some strange peculiarity of constitution, some singular susceptibility of infection. On this, the committee have offered no ideas, have not entered into any inquiries respecting what may have been the peculiar experience of the family of the father and mother under small-pox; whether they may have been affected by it oftener than once.

To conclude, if, in a few rare instances, persons, having undergone the natural or the inoculated small-pox, have afterwards taken the disease by infection, we may very naturally expect a susceptibility of the variolous infection in a few rare instances, after the cow-pock. This susceptibility, however, for any thing the committee have yet published, "remains to be proven."

*Salisbury Square*, 8, *xii*, 1804. JOHN WALKER.

P. S. On finishing the above, arrived the letters of the day. "Notwithstanding," says a correspondent north of the Tees, "Report of vaccine influence having failed in a late instance, you will have the goodness to forward me a fresh supply of matter; being assured, from the first introduction of the practice, that the fault depends entirely upon the inoculator's inattention or want of information."

"I will thank you for any new information, as the report gains credit here, and consequently arrests the attention of the parents who have inoculated with vaccine fluid. I am, &c."

The above may prove the fitness of your making haste to shew, if it can be shewn, that the committee may have possibly made some conclusions which are incorrect, on a subject where so very little of reasoning can be employed. The "*morbi, semel tantum in decursu vitæ aliquem afficientes*," must ever baffle every attempt to explain or even to offer any comprehensible theory on this peculiarity. Their history can never be composed but of simple chapters of facts.

To

## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Have very often proposed to myself to address you; but sometimes the difficulty of the first introduction has prevented me; sometimes the subject on which I meant to write did not, on a second view, appear sufficiently important or new for a first address; sometimes I waited until the following month, when I found my observations anticipated, and very ably too, by a Candidus or a Medicus; and sometimes I deferred, through indolence I fear, giving you certain facts or remarks until the period was past from which they would derive if not great part of their value, at least the salt to render them interesting Neither of these can I fear on the subject of vaccination, for its value must be ever independent of times and seasons; and it wants not any salt to render it interesting: its value, like gold, will be stable and certain; and though it may sometimes be adulterated with too much alloy, the fire will again render it pure; and such is the trial vaccination is now undergoing. Perhaps I am wrong in thus giving you my sentiments, before I have stated the experience from which they have sprung; but as the importance of the subject to mankind is the stimulus which has induced me to bring forward my testimony, so I may be excused allowing some of its operation in this preface. I am deeply sensible too, and I wish that medical men in general were more so, of the fault of omission, as well as commission, or, in other words, that I may be negatively as well as positively unjust. I say, I wish that medical men were in general more impressed with the idea that it is possible to be guilty of the first species of injustice; for I am sure, if they were, many valuable facts would not be lost to the world. It may, and I dare say has been said by individuals, as well on the subject of vaccination as of influenza and others, "I need not give my opinion, nor my testimony, there are a sufficient number to do so without me; mine will be lost, or be superfluous, in the general voice." But they must recollect, that many particles constitute a heap of sand; and they do not consider, that if all were to reason in like manner, all would be silent. I have made this latter remark, as I feel it applicable to myself at present; I mean, though the testimony I were to give you may be considered as small particles, yet I think it right to add them to the general heap.

When

When the cow-pox was first named here, I believe it was only *with a smile*, as in many other places; yet I do not think we were here any later in adopting it, than in other parts of the kingdom; for the practice commenced in this place in the end of 1799, and was very general in 1800. In May, 1801, now three years and a half ago, my then youngest child was inoculated with the cow-pox matter, and the arm exhibited the usual signs of the genuine disease, which was communicated to the system in an evident manner. The year following I had another child inoculated with the cow-pox matter, (now two years and a half ago) and it went through the disease in as satisfactory a manner as the first. I then determined to inoculate them both with variolous matter; but by this time variola had totally disappeared in this neighbourhood, as it was not to be found within an extensive circuit. Sometimes I was told of its being in a neighbouring village; but on farther inquiry, or inspection, it proved to be the chicken-pox, or some similar eruption.* The small-pox being thus, as it were, extinguished, I was more indifferent about the second inoculation; still my inquiries, with those of Mr. Ingham, surgeon, who inoculated my children, continued; and it was only within these few weeks that Mr. Ingham succeeded in procuring some matter. It is supposed the small-pox was at last brought to this neighbourhood by some of the military, or by the cloaths of some of their children. My two young folks were therefore inoculated with the variolous matter on the 14th of last month. The punctures began to inflame within six hours after the insertion of the matter; the inflammation was very considerable on the following day, and increased to the fourth day, when it began to subside; on the fifth day a second inflammation began, with appearance of suppuration about the wounds, which went on till the seventh, when it began again to subside; and it nearly disappeared on the 10th, leaving an irregular scab on the surface of the suppuration. The children kept perfectly well, not being in the smallest degree affected with the presence of a *large quantity of variolous matter* in their arms. I could not perceive even the axillary glands affected in either. This

* The chicken-pox is called here by different names, vulgarly, the *water-jags*; a little farther north, I believe, it is sometimes called the *horn-pox*; and a little farther, the *swine-pox*. Whether, however, these different names are applied to the same species of eruption, I do not assert positively; and will be glad to be informed by any of your Correspondents.

This was the experiment decisive of the security of the vaccine disease against the small-pox, at the distance of three years and six months in the one case, and of two years and six months in the other. I ought to mention, that the youngest, at the time of being vaccinated, was very much affected with the eruption peculiar to young children, well known by the name of the *red gum*, or the *strophulus* of Dr. Willan, which was attended with convulsion, and was wholly relieved from this troublesome complaint by the vaccine disease, and has continued ever since in perfect health. The child had, before vaccination, at various times, different species of this eruption. When I first wished to inoculate my children with small-pox after the vaccine disease, I entertained, I confess, *some small* degree of scepticism, which is, in my opinion, not to be condemned in medical men. That unbelief had been long ago removed; and I now inoculated them with small-pox matter, as a duty I owed them and the public *at this particular period*. This duty has been also felt by several gentlemen of the profession in this place, who have inoculated children for the small-pox after vaccination many years ago, with the same result as I have above stated. It was my intention to have waited for the *exact dates* of some of those cases, as, in four at least, more than four years elapsed between the two inoculations; but as *they* have not yet reached me, I will not now wait for them.

Just as I had written the above, I received a report of two of the cases alluded to, from Mr. Horn, surgeon, in this town, which I will send you as it is; and if it should appear to you too long for insertion, you can give the substance of it, as Mr. Horn requests.

To JAMES WOOD, M. D.

Dear Sir,

I MUST make my situation since I saw you on Thursday last, (having never left my room, where I have been fast moored by my inveterate enemy the gout) plead my excuse for not having complied sooner with your request.

Master C. a fine healthy boy, near four years of age, who had passed through the vaccine disease in his early infancy, was, at the request of his friends, inoculated by me on the 2d of November, 1804, with fresh fluid *variolous matter*, taken that morning. I made a slight puncture in one arm, avoiding as much as I could to injure the cutis; and then re-inserting the point of my lancet, well

well charged with fluid matter, (taken from a piece of lint which had been soaked in several well maturated pocks on the 7th day from the eruption) I endeavoured, by pressing down the cuticle with my nail while the lancet was underneath the skin, to leave the matter between the cutis and the cuticle; and in doing this, the least possible *speck* of blood appeared. On the other arm I made the slightest scratch, for about one-sixth of an inch in length, through the cuticle, so as just to reach the cutis, and then separating, or rather stretching, the two sides of the little scratch, I wiped the flat part of the lancet, well charged, upon the skin. Next morning, the 2d of November, both the puncture and scratch were much inflamed, and the redness extended to the circumference of a half-penny; the 4th of November, and third day from the operation, reckoning the day it was performed as the first, the redness was much less, and I was a little in doubt; the 6th of November the redness was entirely gone off, and a little scabby appearance remained, which disappeared in two days, and the child never felt any other symptom whatever. I cannot give you the exact age of my patient, he having been taken home to London; neither can I tell you the exact distance of time from the *vaccine inoculation*. I am, however, pretty certain that he was near four years old; and I am sure he was vaccinated very early, under a practitioner of high celebrity in town.

On the 3d of November, 1804, I inoculated Miss B. between four and five years of age, and who had been vaccinated above four years before by your late friend, Keenland, when she shewed every appearance of the genuine disease. The variolous matter was taken from the same patient from whom I procured that employed for Master C. The same method was used, and the same appearances followed, with rather less redness on the second day; but yet with far more than usually appears in small-pox inoculation at the same period.

These are the only two I have inoculated with variolous matter since the doubts respecting the preventive effects of vaccination have been made public. I have however inoculated several, I believe I may say scores of children, who had recently been vaccinated, and no particular effect followed.

I have lately, i.e. the 29th of October last, vaccinated a young lady, of about nineteen or twenty years of age, who had, at different periods of her life, been three times inoculated with variolous matter; but no disease ever followed,

lowed, as far as I could learn, although three distinct pits or marks from the different inoculations were very visible. I took the vaccine matter from a well-defined pock on the arm of a healthy child the eighth day from the time it was vaccinated (still reckoning the day of the operation as the first.) The appearances on her arms were such on the second and third days, as to induce me to suppose the disease would follow. There was a slight redness and rising on each of the parts punctured and scratched, and she complained of stiffness and slight pain up the arm, extending to the axilla; on the fourth day these appearances declined, and on the seventh there were none remaining.

I am, &c.

*Newgate Street, Dec. 5, 1804.* FREDERICK HORN.

Next to the vaccine disease being a security against the small-pox, I consider the circumstance now fully established, that the second inoculation with vaccine matter, if the first has affected the system, does not produce a pustule similar to the first, or, in other words, which goes thro' the stages of the original vaccine pustule; of next importance, for if there is any doubt of the security produced by the first inoculation, a second inoculation only is necessary to remove all doubt, as if the pustule does not come forward in the regular way, but retains something similar to the small-pox after vaccination, a perfect security may be relied on, without having recourse to small-pox inoculation, which only keeps alive that dreadful disease, and tends to prevent its total extinction. On this point it may be curious to observe, that although the first vaccine pustule produced by the usual inoculation does not sometimes exhibit all the signs of a genuine pustule, by inflammation taking place in a great degree, yet the system is equally secure against the small-pox; and on a second inoculation with vaccine matter, the pustule does not go forward as soon as if the order of the first pustule had not been injured by too great inflammation.

It is yet the custom here with the common people to bring their children for inoculation to the Dispensary in the spring and autumn; it is therefore necessary either to procure fresh matter for each of these periods, or preserve some in the best manner possible. Some vaccine matter was preserved last winter, nearly for six months, at the dispensary here, in capillary glass tubes hermetically sealed; it had been preserved so before, and answered very well. This last spring, all the children inoculated with this matter

matter had their arms violently inflamed,* and instead of the regular pustule and scab, a large crust of a brown colour with ulceration took place. Much apprehension for the security of so many children, about two hundred and fifty, naturally took place, and the inoculation was stopped, until fresh vaccine matter was procured from the Vaccine Institution in London. On procuring this, the inoculation went forward, and the usual pustule was produced. Altho' some of the arms of the first inoculation did not go on to the degree mentioned above, yet matter taken from them by private practitioners in the town, produced equal inflammation on the second remove; notwithstanding the violence of the inflammation, the security wished for was obtained without a general re-inoculation, (which would have been impossible) by all those who were inoculated a second time with the fresh vaccine matter, *resisting its second action,* in the manner I have mentioned before; and out of the whole number,† there has not occurred an instance of any one being seized with the small-pox, altho' it has made as much progress here of late as it seemed to be capable of. To give a general idea of the state of the arms of these children at the Dispensary, whose arms were so much inflamed as to destroy the progress of the regular pustule, and also of the difference of the pustule in the second inoculation, from the first, I will give one case as stated to me by Mr. Fife, surgeon, which occurred in his practice.

"That

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* The inflammation was so violent in two or three instances as to be supposed to produce an eruptive vaccine disease. In two cases I saw an eruption; the one appeared to me, and many others who saw it, to be *accidental* chicken-pox; the other was merely *a rash,* of an erysipelatous kind, not sensible to the fingers.

† The vaccine inoculation began by the Dispensary here, in March 1801; and the following is the report to the 3d of December last, from that period.

| Inoculated in | | Had the disease. | | Did not take the disease. |
|---|---|---|---|---|
| 1801, 2, 3, - | 921 | 917 | — | 4 |
| To Sept. 1804 - | 451 | 451 | — | 0 |
| To Dec. 3, 1804 | 186 | 186 | — | 0 |
| | ——637 | —— | | — |
| | —— | 1554 | | 4 |

Total - 1558 inoculated; and not one instance has occurred of any having been afterwards affected with small-pox, or any eruption like it. In the former reports of the inoculation of the small-pox, the number that did not take the disease, formed every year a much larger proportion than those that did not take the vaccine disease. The above report shews how much vaccination increases in favor here with the common people, who were invincibly averse to inoculation for the small-pox.

"That part of the arm where the matter was inserted, put on the usual appearance till about the fifth day; it then looked as though the vesicle had burst: the inflammation from this time increased considerably, and instead of a distinct pustule, a large irregular crust formed, of nearly the size of half-a-crown, and successive scabs continued forming for near a month."

A second vaccination was attempted in this case two years and a half after, and the regular pustule did not take place; but after a hasty inflammation, which continued several days, at an equal degree, a small vesicle and scab were formed, without any areola, or succeeding scab, as takes place in the regular pustule on the first inoculation, when too much inflammation* does not prevent it.

The next circumstance deserving attention is, that in a second inoculation with small-pox matter, after vaccination, the appearance of the scab is different from the scab that follows the suppuration of the inoculated part in a first inoculation with small-pox matter previous to vaccination; this was first observed to me by Mr. Fife, who describes the difference as follows:

"When a child has been inoculated with small-pox, (not having before been vaccinated) the succeeding scab is generally of an irregular form, the colour resembling horn, and the edge very little elevated above the surface of the skin. In the trial I made with my own child with variolous matter after vaccination, an irregular crust was formed, which died away after the seventh day."

On the arms of my own two children, mentioned before, the same irregular crust was formed, and different from that which follows inoculation with small-pox matter *before* vaccination.

This observation appears to be of *much importance,* as it will tend to prove in all second inoculations with small-pox matter after supposed vaccination, whether the system had

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* It has been observed, that any external sore, or inflammation, is evidently affected when the system is under the influence of the vaccine disease; in the case mentioned by Mr. Fife, he says, "The child, when first vaccinated, had a slight eruption nearly surrounding the right ear; after the irregular crust was formed, the eruption below the ear became much worse, degenerating into several small foul ulcers, which continued open near a month; the inoculated part continued forming successive scabs during the same time, and both got well nearly together." Was not the affection of the inflamed part near the ear, in this case, an evident sign of the system being under the influence of the vaccine disease? The second inoculation certainly went to prove this.

had been really vaccinated or not; as, if it had, no eruption of course would take place, and the irregular scab would, or, vice versa, if eruption of small-pox took place, the appearance of the scab might, certify that the system had not been previously vaccinated.

My wish to send you this report in time for your next number, prevents my having the opportunity of rendering it so compleat as I at first proposed;* but I am induced to send it as it is, as you have not had any report whatever of vaccination from this district, which, considering its extent, and its population, is the more surprising. At the last meeting of the Medical Society of this town, the subject of vaccination, with the late cases of Mr. Goldson and Dr. Rollo, was fully discussed, and the Society agreed to the following conclusion: *That from our experience, we have no doubt whatever of the vaccine disease being a security against the small-pox, but only from what we have read.*

To this conclusion I will add a few more, drawn from what I have seen.

That the vaccine disease is a security against the small-pox, even although the pustule has been prevented, by too much inflammation, from assuming the regular appearance described by it.

That the eruption peculiar to infants, called *strophulus*, does not prevent vaccination being a security against the small-pox, although present when the inoculation takes place.

That after an effectual inoculation with vaccine matter, a second inoculation with the same matter does not produce similar effects, by the pustule not going on as in a first inoculation.

That the scab formed on the suppurated part produced by inoculation with the small-pox matter, differs in that performed after vaccination from that which takes place on inoculation with small-pox matter before vaccination.

Thus we are not infected here with any improper scepticism or infidelity. We know that there are neither general rules without some exceptions, nor general laws without some varieties; and we believe that the vaccine disease will have as few anomalous cases as the dreadful disease had, which it has, I trust, exploded; and that should it *ever happen* that small-pox takes place after satisfactory vaccination,

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* I intended to have made my inquiries general by a circular letter to all the surgeons in this neighbourhood; but I found the undertaking would be too great for my time *at present*.

vaccination, we are no worse than when small-pox took place after small pox, but much better, because the chance of ever receiving the infection of small-pox will be so much diminished. I am, &c.

*Newcastle-upon-Tyne, Dec.* 5, 1804. J. WOOD, M.D.

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## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

MINE of the 3d of November, against the word VACCIOLA, I beg leave in some measure to retract; but, if the word was by me termed *a mere barbarism*, it was so on the ground of Dr. Walker's defence of its being *only* "for the sake of euphony, and because of similitude." (Medical and Physical Journal, No. lxix. p. 440.)

He should rather have defended it, as I now will, thus: Dr. STOKES, from *Vacca*, had a right to coin *Văccia*, to express κατ' ἐξοχὴν, that particular bovine disorder, in which mankind is at present so greatly interested. But, as it is to the animal probably as *mild* an affection, as since its communication from the cow it has been to the human species, it may rather deserve the coinage of the diminutive *Vacciola*, to express a disease, which but in a small degree interrupts the health of either the brute or the human patient of it. Having established *Vacciola* upon this ground of preference to *Vaccia;* the at least equal euphony of the former, and also the similitude of its middle syllables to those of the long established Variolæ, may be adduced as additional arguments in its favor.

*Vāccĭŏlă*, on such grounds, may stand, as expressive of the mild bovine disease. But, it may be said, Why may not another medical authority coin *Vaccīna* or *Vaccīnŭlă?* I will answer, Vacciola is a substantive, coined *immediately* from a substantive or substantives; whereas Vaccina, a substantive, is coined from vacca *mediately* thro' the adjective vaccina. Vacciola is solely on that account preferable to Vaccina, without regard to the vaccine articles of human food.

But, Vaccia and Vacciola, the latter preferable perhaps even to good compounds, are coinages, and nothing more. They express only what it is agreed they shall express. Vaccævāra and Bōūnŏsŭs, legitimate compounds, and bearing a precise meaning, may, with my consent, readily yield to the coinage Vacciola of Dr. Stokes; who, rather than Dr. W. may be entitled to this apology from me. Vácciola, both accent and quantity upon the first syllable, which alone is long, is a pæon primus. Vărĭŏlæ is a pæon 4tus, accent on the i.

The compound, which Dr. W. (in note, p. 440, as before,) has requested, may be, ANDRONOSUS, a first pæon, or the first syllable only long. Thucydides, in his description of the plague at Athens, terms it, if I rightly recollect, Νοσος, κατ' ἐξοχὴν, because of its having been pre-eminently destructive. The same reason may support the term Andrŏnŏsŭs. BOUNOSUS is that bovine disorder, which κατ' ἐξοχὴν, or pre-eminently, at present interests the world.

The

The inoculation of it might also be termed, *Jēnnērĭă;* thence, Jenneriation, Jenneriator, to jenneriate, and jennerious matter.

*Nov.* 5, 1804. Your's, &c. PHILOLOGUS.

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## *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

IN my communication on the Management of Leeches, I purposely avoided hypothetical speculations; well knowing that they frequently mislead, instead of instructing us.

There have been two methods strongly recommended for the preservation of these useful little animals; but *experience alone* will determine, which we ought to prefer. The same unerring guide would, perhaps, lead us to make farther discoveries respecting them, were we to imitate their native ponds, by acquiring an exact knowledge of the contents of the water, &c. in which they are most plentifully produced.

We might then, by exposing them at different periods to the action of the atmosphere, when it undergoes its greatest variety of changes, observe their resources when they attempt to avoid the inconveniences of a change of temperature, or the sudden afflux of a fresh quantity of the surrounding medium.

As experiments of this kind, which are at once both useful and amusing, may be made without much trouble or expence, I should hope that some of your Correspondents will apply themselves, and give the result of their observations through the medium of your valuable publication. I am, &c.

*Nottingham, Dec.* 5, 1804. JOHN WHITLAM.

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## *To the Editors of the Medical and Phyſical Journal.*

GENTLEMEN,

THE subsequent question may appear to you sufficiently interesting and important to justify the assertion of some facts relating to it, in your highly respectable and widely extended publication.

How can it be explained that catarrh, phthsis, and rheumatism do not more prevail in Russia, as the inhabitants of this country are particularly exposed to great and abrupt changes of temperature? This is more particularly exemplified in their bagnios or warm-baths. These are either public

public or private. In the public, persons are admitted by paying a certain stipend. The private, which are very numerous, are attached to the dwelling houses of opulent individuals. The public bagnios consist of a large room or rooms with elevated seats, the uppermost reaching nearly to the ceiling. These rooms are heated by means of an oven, having some large pebble-stones at the top over the fire; these become heated almost to a white-heat, then boiling water is thrown upon them; the room is soon filled with vapour heated in proportion to the quantity of water thrown upon the stones, and is seldom less than 140° of Fahrenheit's thermometer.

The common people are in the habit of going to these baths two days every week. These are called the public bathing days. Here you may see from two to three hundred persons, perfectly naked, without any regard to age or sex. After they have exposed themselves to the above heat from ten to thirty minutes or more, they come into an open court yard in the summer, pour cold water upon their heads and bodies, and in the winter plunge themselves into snow. On their return from the bath the whole surface of the body is of a very florid colour; which does not disappear either on the exposure to atmospherical air, the affusion of cold water, or any other means; but continues for some hours, diminishing in a slow and gradual manner.*

The air of Russia is generally dry; the changes are very sudden, and the extremes great. Their winters are much colder than ours in England. It is not uncommon for the thermometer of Fahrenheit to be from 40° to 50° below the freezing point during a considerable period; at the same time that their summers are much hotter than ours.

A much respected and esteemed friend, Mr. Taunton, of Pater-noster Row, has communicated to me the results of his own personal experience with regard to the baths in Russia.

" June 28, 1803, three A. M. I went into the bath with my clothes on, heated to 45° of Reaumur's scale, equal to 133 of Fahrenheit, pulse 56; when I had been in twenty-three minutes it increased to 150, and afterwards became so quick as not to be numbered; profuse perspiration from every part of the body; respiration not much altered; a continued stream of water ran from the mouth and lungs. On

* See Fordyce's Dissertation on Fever, p. 168—9.

On going into the air a slight sickness came on, and continued for some hours with a little difficulty of breathing. Great debility remained during the day, with a sensation of cold. Did not sleep at night, though apparently overpowered by it in the afternoon; the perspiration appeared to cease instantly on exposure to the air, (which was cool for the season) but a general softness came on the skin after walking about half a mile.

"June 30, 1803, six P. M. I went into the bath (first taking off my clothes) heated to 55° of Reaumur, equal to 156 of Fahrenheit; pulse 60; rose in ten minutes to 152, and in five minutes more became so quick as not be numbered. A violent smarting sensation was produced on the skin; respiration not much affected, but rather quicker than natural; dressed and walked into the air immediately; perspiration appeared checked, but took no cold, and did not get any sleep during the night."

I hope to receive from some ingenious correspondent an explanation with regard to the question suggested in this communication. If I should be disappointed, I shall venture to send you in a little time my own conjectures, in relation to this curious and important subject.

I am, &c.

*Southampton Row, Russell Square,* J. REID.
*Dec.* 6, 1804.

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# CRITICAL ANALYSIS
## OF THE
# RECENT PUBLICATIONS
## ON THE
## DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

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*An Enquiry into the Efficacy of Oxygen in the Cure of Syphilis; to which are subjoined, a few general Observations on its Application in various other Disorders. By* CHARLES PLATT, *Surgeon to the New Finsbury Dispensary, and Member of the Royal College of Surgeons, London.*

THIS work begins with the inquiry, whether gonorrhœa and lues arise from the same poison? in which the author, after recapitulating the arguments of Swediaur, Bell, and Hunter, decides in favour

favour of the latter. Mr. Whateley's revived notion of ulcers in the urethra is introduced; and Mr. Platt expresses his suprize at an opinion so inconsistent with experience, an accurate knowledge of the parts, and of the disease. Some practical remarks follow, on the treatment of gonorrhœa virulenta and gleet, which evince the industry and good sense of the author.

We now enter on the history of the substitution of nitrous acid, and afterwards of oxygen, in any form for the mercurial salts, traced from Mr. Scott to Dr. Beddoes, Mr. Watt, Dr. Rollo, and Mr. Cruickshank. After this follow the author's own experiments. Four cases of well marked primary venereal ulcers or chancres are related, in which the nitrous acid was ineffectually tried, and the patients were at last cured by mercury. Two others are subjoined, in which the same consequences followed, from the use of oxygenated muriatic acid, and two more, one of primary, the other of secondary symptoms, in which oxygenated muriate of pot-ash proved equally ineffectual.

The author now enters into the most important part of the work, viz. to show that all this difference of opinion must have arisen from some difference not sufficiently attended to in the local diseases thus treated. He shows how necessary it is to be more accurate in discriminating appearances, before we give credit to remedies. "This interesting inquiry, he observes, was originally instituted by Mr. Hunter, and hath since been prosecuted with much labour and ingenuity by Dr. Adams,* who has thrown a considerable portion of light on a subject hitherto involved in much obscurity." Some long quotations follow from Dr. Adams's work, tending to prove the variety of ulcers to which the genitals have been always liable, as appears by the writings of authors who described them before the venereal disease was known. Dr. Willan's observations on prurigo pudendi, are next introduced, as a further proof of the uncertainty of these local complaints. Lastly, Mr. Hunter's suspicions, "that new poisons are arising daily, in many respects similar to the venereal, though not in all," close the general quotations on this enquiry.

The author now touches on a subject which we cannot help wishing he had omitted altogether or informed himself better. "There is, says he, another disease, which from its occasionally attacking the genitals, and assuming some similarity to syphilis, is frequently confounded with it. In Africa, the West-Indies, and other places, it is known under the name of yaws; in Scotland, is usually termed sivvens or sibbens; and which Mr. Bell and some other writers, consider as a variety or peculiarity of the venereal disease." It is unnecessary to follow our author any further on this subject, as there is reason to believe he is mistaken in his first position. Though sivvens in Scotland is sometimes called yaws, yet

* Vide Adams's Observations on Morbid Poisons, Phagedæna, and Cancer,

yet yaws in Africa and the West-Indies is never called sivvens, and the two diseases are perfectly different in character, and the course each of them pursues. It is very remarkable that Mr. Platt should have fallen into this error, when the authorities to which he refers, are in direct opposition to him. Dr. Gilchrist and Mr. Bell both speak of sivvens as incurable, excepting by mercury, and say nothing concerning the impossibility of the same persons being infected twice in their lives. Mr. Hunter speaks of yaws as a disease which runs through its course, and leaves the patient for ever free from a future susceptibility of the infection. It is true, neither of them describe the diseases they respectively mention with sufficient accuracy. This is still a grand desideratum. In one of our Journals, however, the reader will find that Dr. Adams has received the prize from the London Medical Society, for his description of yaws; and we trust his late journey into Scotland for that purpose, will furnish a satisfactory account of sivvens.

Mr. Platt now attempts an accurate discrimination of the chancre from all the other ulcers on the genitals, with which it has been confounded. His first diagnosis is that hard or thickened edge and base which is peculiar to this disease. His next remark is, that the chancre is attended with little or no pain whilst the phagedænic ulcer is peculiarly painful. This last distinction we apprehend the author intends to be considered as only comparative, for the chancre is always attended with uneasiness, and in some irritable habits with considerable pain. Two valuable cases are subjoined of ulceration in the genitals, of that complexion which is often mistaken for venereal, and which the Author treated as such. But the progress of the diseases, and the remedies to which they yielded, convinced him of his mistake, and induced him to class the symptoms "under that description of diseased action which Dr. Adams has denominated the sloughing phagedæna or *nigrities serpens* of Celsus." This section closes with some judicious observations, strengthened by Lord Bacon and Mr. Hunter, on the indiscriminate love of novelty, and the necessity of accuracy and patience in pursuing every inquiry.

Another division of the work follows, entitled, "Observations on the Pneumatic Doctrine." This contains many judicious remarks, but not much novelty. The reader will, however, find amusement in this recapitulation of the crudities of some modern practitioners, whose language was at one time so decisive. On the whole, we have found much satisfaction from the perusal of this tract, which we recommend to every practitioner who wishes so correct his knowledge, and render his practice at once more interesting and useful. We hope the Author will pursue his inquiries, and doubt not his future performances will be free from those little imperfections which in this we have reluctantly marked.

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*The*

*The Invalid; with the obvious Means of enjoying Health and long Life.* *By* A NONAGENARIAN, *Editor of the Spiritual Quixote, Columella, Reveries of Solitude, &c.* 8vo. pp. 147. Lond. 1804.

IT is the title only of this little publication that gives it any claim to notice from the medical reader; but the lounger may find some spare minutes agreeably employed in running over a few desultory remarks and precepts of temperance, which always derive an interest in coming from the pen of one who (we suppose) has been enabled through temperance to reach the term of extreme age. The following is a sample of the pleasant garrulity of this second Cornaro.

"But man, as lord of the creation, by his prerogative, falls foul on whatever comes in his way, and ransacks the universe to gratify his voracious appetite; the fowls of the air, the fishes of the sea, the beasts of the forest, with vegetables of every *genus* and every *species;* not only "herbs, which were intended for the use of man," but roots, which seem reserved for the food and the snouts of hogs; nay, even the excrescences of nature, mushrooms, and truffles, indigestible substances; which if they were ever intended to be eaten, it must probably have been by the inhabitants of the infernal regions.

"If temperance, however, regulated our use of these various articles of food with which Providence indulges us; if we killed the animals without cruelty, and cooked them with plainness and simplicity, they might be what Providence intended them, instead of what we too often make them; a blessing and not a curse: but when we torture them in taking away their lives, as we often do, and scarify and carbonade, and bedevil their flesh not only with pepper and salt, as we do the gizzard of a turkey, but adding a little *nutmeg*, a little *cinnamon*, a blade of *mace*, with chalot and onions, &c. and eat it with oil, vinegar, or mustard; such an heterogenous mixture, instead of producing a lacteous chyle, flowing through the alimentary canal, like the gentle stream of Arno, must become a caustic fluid, rushing like the fiery torrent of Vesuvius, harrowing up and tearing the vessels; or at least generate fevers, calentures, and every disease incident to the human body.

"The luxury of man, however, revenges itself upon his rapacity, and brings forth fever, gouts, and rheumatisms, and all the contents of Pandora's box, which infest the *human species* in every part of the civilized world.

"Some author calls physic and physicians necessary evils; they certainly are so; but we ourselves, by our excess and intemperance, make them necessary. A young extravagant spendthrift considers the law as a nuisance, and bum-bailiffs as his mortal foe; but, let him be more frugal, and a better œconomist, and the evil ceases, and jails and catchpoles become harmless things.

"Sydenham observes, a disease or fever, though inimical to the human body, is nothing more than the effort of Nature to expel the morbific matter, for the health and emolument of the patient. This

seems to be the merciful provision of Heaven, to counteract the insatiate gluttony of the human race.

"Dryden, in his well-known lines, says, with truth, no doubt, that

'The first physicians by debauch were made,
'Excess began, and sloth maintains the trade:
'The wise for health on exercise depend—

"But, when he adds,

'God never made his work for man to *mend*—

"The poet imposes upon himself, as well as on his reader. Instead of *mend* he meant *improve*. A country carpenter could not *improve* a coach or phaeton made by a coach-maker; but if the axletree or wheel were broke, he could *mend* or repair. This is applicable to the physicians.

"The philosopher, Pythagoras, after having travelled over India, on his return settled in Italy, and, thence passing over into Sicily, said, the most remarkable circumstance he had observed in his travels, was a people who made two meals in a day.

"What would this philosopher then say, should he, in a state of transmigration come into England, (in the person of the wandering Jew suppose) where, instead of *praying* seven times a day, as the ancient Jews did, we *eat* seven times a day—we breakfast at ten in the morning, suppose we eat sandwiches or noonchins at three o'clock, dine at six, (I speak of sober people,) drink tea at eight sup at eleven, and if we spend a convivial evening, olives, or anchovies must give a zest to our liquor; if a ball is given, jellies, macaroons, &c. &c.; if hot, something more substantial is expected; and probably the day is concluded, as well as begun, with a second breakfast at five o'clock in the morning."

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*Elements of Galvanism, in Theory and Practice; with a comprehensive View of its History, from the first Experiments of Galvani to the present Time; containing also, practical Directions for constructing the Galvanic Apparatus, and plain systematic Instructions for performing all the various Experiments. Illustrated with a great number of copper-plates.* By C. H. Wilkinson, Lecturer on Galvanism in Soho Square, &c. &c. Two vol. 8vo. pp. 468. London, 1804.

In a very candid and sensible Preface, the author explains his design in the following manner:

"Soon after the important experiments of Galvani were announced, they were repeated and diversified by the most eminent Physiologists in every part of Europe. Their opinions having been diffused through different philosophical publications, the selection and arrangement of such of them as have been deemed worthy of the reader's attention, have been attempted in this present work.

"These materials I have not arranged systematically, but have principally been governed by the era of the original discovery. I have

have divided the work into the two epochs which appeared the most interresting; the first consisting of the various discoveries, from the period of Galvani to that of the Voltaic pile; when the second epoch commences, and is carried down to the present time.

"The Historical Details constitute the first volume, and part of the second. The remaining portion I have devoted to the development of that particular theory which I have for some time entertained, and have adhered to the arrangement which I purposely made for the lectures I have given upon this subject.

"I have endeavoured to demonstrate the principles of Galvanism by those of Electricity. As, on this latter subject, I have presumed to entertain opinions contrary to those generally admitted, it has appeared to me absolutely necessary to set out by stating these opinions, before I should enter on the Elements of Galvanism.

"On this account it is that, after having closed the History, I have commenced the Elementary Part by several chapters on Electricity, with a view to the explanation of certain points, on which my ideas will be found to be somewhat novel.

"This work is illustrated by various plates; and such descriptions and explanations are introduced, as will enable every attentive reader to construct his own apparatus, and to repeat with facility any of the experiments. In the medical application of Galvanism, I believe no person in England has been more extensively engaged than myself; the results of my observations materially differ from those of the continental practitioners. In many instances I have derived from its employment the greatest advantage; while, in many others, I have found it productive of no good effect. In some cases, I am even led to think it rather injurious than beneficial.

"When, in the first instance, I entered on the medical application of this principle, I was led by the accounts of Grapengiesser, and other foreign physicians, to entertain the most sanguine hopes that it would prove one of the most active remedies we possess. Experience has taught me that my expectations were too ardent. It is probable, however, that my failure, in the cases in which it has been successfully employed abroad, may have originated from some circumstances of which at present I am not aware. I therefore trust that the statement I have made, will not discourage other practitioners from its use, as it is only from the united labours of professional gentlemen that its real utility can be ascertained.

"There are many complaints, in which I have found the principle of Galvanism a most beneficial and powerful stimulant, greatly superior to any effects I ever experienced from electricity. At a first view it may appear contradictory, on a supposition that both the principles are the same; that Galvanism, which is merely a weaker intensity of electricity, should, notwithstanding, prove most active on the animal frame. The reason of this I have attempted to explain; and I am induced to think that the influence of Galva-

nism solely depends on the important agency it exercises in animal substances."

The division of the historical part of the subject is very judicious, the Voltaic discovery forming a most important æra in the history of Galvanism, and of natural science in general; and the uncommon beauty and brilliance of many of the experiments connected with the Voltaic pile, having remarkably contributed to render this, at present, a favourite branch of natural philosophy.

We may just remark, that the author's title, *Elements of Galvanism*, does not precisely reach the character of the work; at least two-thirds of it being a *history* of the experiments and opinions of those who have most distinguished themselves in these inquiries; were the present work merely elementary, much of this interesting part would have been superfluous, and a different and more select arrangement would have been required.

The first chapter is deservedly occupied by the discoveries of Galvani, with a short and interesting sketch of his philosophical life, extracted from the Memoirs of the Medical Society of Emulation at Paris. The accident which first led to the detection of that principle in animals, which has since been termed animal electricity, or, commemorating the great discoverer, *Galvanism*, is thus related.

"Galvani being one evening in his laboratory, where he was employed in making experiments in the presence of a party of his friends, several frogs, which had been skinned, and were destined for soup, happened accidentally to be placed on a table, on which was also an electrical machine; between the conductor and the frogs there was a certain space. One of the company who assisted at the experiments, having brought, unintentionally, the point of a knife into contact with the internal nerves of the thigh of one of these animals, the muscles of the limbs were instantly and powerfully convulsed. The wife of Galvani being present, was struck by the novelty of this phenomenon, between which and the disengagement of an electrical spark, she fancied that there was an agreement in point of time. On her making this observation to her husband, he resolved to ascertain the truth of so extraordinary a fact, and accordingly brought the point of a scalpel, or dissecting knife, in contact with the crural nerves of one of the frogs, at the same time that a spark was drawn from the electrical machine. The result was, that the same contractions were manifested. As it was possible that they might have been owing to the simple contact of the scalpel, which might serve as a stimulant, rather than to the disengagement of the spark, Galvani, to clear up this doubt, touched the same nerves of several of the frogs, while the electrical machine was in a state of rest. The contractions which had heretofore been observed did not ensue."

The theory suggested to this acute physiologist by these and similar phenomena, and by a comparison of them with the effects produced by electricity, has been the subject of much controversy;

sy; but its ingenuity, and the reputation of the inventor, give it a claim to be commemorated. Mr. W. gives it in the following terms.

"The nerves," observes Galvani, "which are distributed in the different parts of the muscular system, and which receive or transmit the electrical fluid, have all of them a common origin in the cerebral organ; and it is not probable that these nerves, the structure of which is so varied in the universal economy of animals, should be the secretory organs of an homogeneous fluid, such as the one destined to excite the muscular contractions." He consequently supposes, in the first place, that all animals are endued with an inherent electricity appropriate to their economy, which electricity, secreted by the brain, resides especially in the nerves, by which it is communicated to every part of the body. And, secondly, that the principle reservoirs of this electricity, which he calls *animal*, are the muscles, each fibre of which ought to be considered as having two surfaces, and as possessing on this account, both a positive and a negative electricity, at the same time that it, in a manner, represents a small Leyden phial, the nerves with which it is provided being the conductors.

"The mechanism of the various movements is explained by Galvani in the following manner: The electrical fluid is drawn and attracted from the interior of the muscles into the nerves, from whence it afterwards passes to the external surface of the muscles; insomuch, that each discharge of this description of electrical phial is followed by a muscular contraction, which is the effect of the *stimulus* produced by the electricity. He was strengthened in this conjecture by the perfect analogy he fancied he could perceive between the phenomena of the Leyden phial in electricity, and the muscular contractions. However this parallel may have been since weakened by a few isolated facts, or rather, by the conclusions which have been drawn from them, it is certain that there is a striking similitude in the principal points."

It would be foreign from our purpose to attempt an abstract of the contents of the mere narrative part of Mr. Wilkinson's work; a moderate compass would not render it intelligible; and in this part, the author has only the merit of an industrious compiler, the experiments of Valli, Vassali, Volta, Humboldt, Fowler, &c. being duly detailed, and generally in the very words of the respective authors. Mr. W. clearly shews that he has studied the subject very extensively; and the portions that he selects of the different authors who have written on this science, are well calculated to give, in a moderate space, their leading facts and opinions.

We were particularly pleased with the concluding chapter of the first volume, on the application of galvanism to medicine; in which Mr. W. has selected the most curious parts of the very interesting ideas of Galvani, Grapengeiser, and, above all, Humboldt, on this untried and important subject. The reader will see with what ingenuity Galvani has attempted to transfer to the animal economy,



phenomena

phenomena observed in the electric machine; with what judgment Humboldt points out the particular classes of diseases, to the relief of which galvanism offers the fairest prospects, and how much remains to be done in the investigation of this branch of materia medica. Convulsive diseases, those that are generally supposed to depend more peculiarly upon morbid changes of the nervous system, (exclusive of external injury) have naturally occupied the first attention of these medical philosophers. If the success attending these first efforts has not corresponded with the sanguine hopes entertained, and has thereby entirely damped the ardour of pursuit in some zealous followers of this curious branch of natural philosophy, the sensible observations of Humboldt may be of service in keeping up its due importance with the public. Mr. Wilkinson thus details them.

"Humboldt's communication on the application of Galvanism to practical medicine, was addressed to M. Loder. After five years of constant researches into the laws by which the phenomena of Galvanism are governed, and into those which relate to the irritability of the nervous and muscular fibres, this celebrated physiologist was certainly enabled to decide on the application of these phenomena to practical medicine. After having agreed with M. Loder, that the principal advantage of Galvanic discoveries, consists less in its direct application to the derangements of the animal economy, than in the light it may throw on the nature of the nerves, and on the energy with which they are endued, he proceeds to observe that, in an age like the present, when a slow and progressive progress in the sciences is considered as a stationary state; in an age, in short, when a desire is manifested to collect the fruits before the flowers are formed, the experiments which have, from the moment they were conceived and made, promised a speedy and immediate application to the healing art, cannot have failed to attract the particular attention of the public, by whom such an application was in a manner anticipated.

"It is thus that galvanism has been occasionally recommended as the criterion of death, and at other times as a powerful and salutary stimulus in the diseases of the nerves. But, when an idea was in the first instance formed, of the electric fluid and its properties, was it not immediately thought that, in its action on the human body, it would supply a remedy for all the diseases to which it is subject? In the same way, after having noticed the galvanic phenomena, it has been latterly apprehended that two pieces of metal, employed in a particular way, would, as it were by enchantment, recall to life those who have perished by asphyxy, restore sight to the blind, re-establish, in all cases of paralysis, the use of the limbs, and, in a word, produce more salutary effects than the Faculty have been enabled to obtain from the multitude of chemical, mechanical, and other remedies, which have been employed for so many ages.

"Our physiologist, who is not an enthusiast on this subject, examines

amines cooly and without prejudice, what the medical science has a right to expect from galvanism, and subjects to a rigorous analysis the opinions propounded on this subject by the most distinguished naturalists. 'Let it not be forgotten,' he observes, 'that the science which is under our consideration, is still in its infancy, notwithstanding the time that has elapsed since its discovery. On the first occasion that soap-bubbles filled with hydrogen gas were observed to rise rapidly towards the ceiling of an apartment, the spectators were far from imagining that this phenomenon would furnish man with the means of elevating himself in the air, and of hovering with security over the ocean itself."

( To be continued. )

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*A Practical Treatise on the superior Efficacy and Safety of Stizolobium or Cowhage, (the Dolichos Pruriens of Linnæus) internally administered in Diseases occasioned by Worms; wherein are exhibited, a concise Statement of the Symptoms of the Disease, and the Uncertainty of most other Vermifuges now in Use. To which are added, Observations on some other indigenous Anthelmintics of the West Indies; and several Cases not published in any of the former Editions.* By WILLIAM CHAMBERLAINE, Member of the Royal College of Surgeons, London, &c. &c. 12mo. pp. 134. London, 1804.

THE title of this little pamphlet announcing a ninth edition, no analysis of its contents appears to be required. The Author has now, very judiciously, prefixed Dr. Hooper's neat and accurate description of the different species of worms infesting the human body, first published in the second volume of the Memoirs of the Medical Society.

The following practical directions for the exhibition of the Cowhage may be useful, as they are obviously dictated by much experience.

"My usual way of preparing and administering the Cowhage, is in the form of an electuary, with honey, molasses, or syrup of a thick consistence. Formerly I was not in the habit of observing any exact proportion of the quantity of the setæ; but as, since the publication of the former editions of this Treatise, the demand for it has increased beyond my expectations, I have found it necessary to adopt certain formulæ for ascertaining the proportions; which proportions, although I find them in general to answer very well, I nevertheless, in some particular cases, find it necessary to vary; for there never yet existed any general rule, to which some exception or exceptions could not be found. After repeated trials and experiments, in the course of five and twenty years, (during which period I have been in the constant habit of exhibiting the Cowhage as an anthelmintic) made with a view of finding out the best vehicle for this substance, I cannot say that I have found any less exceptionable than the good old vehicle, common treacle, such as is to be had at every grocer's. I have tried conserves, but children


ren

ren cannot be prevailed on so readily to take them. Honey would not be an incommodious vehicle, but it is not with every stomach honey will agree; for it is well known, that in some constitutions, violent colicky complaints are brought on by the smallest quantity of honey, or even by drinking any kind of vinous liquor in which honey enters as an ingredient: and there are these advantages in treacle. First, that every body knows what it is. Secondly, there are few children who do not like it. Thirdly, it is not apt to be spoiled, or to ferment, unless kept in too warm a place. And, lastly, it is gently aperient, and, in that view, an auxillary to the principal ingredient. But if, from a dislike of treacle, some other vehicle would be preferred, raspberry jam or currant jelly will prove very good substitutes.

"At the request of some indulgent parents, in order to *cheat* into compliance such of their children as could not be prevailed on to take any thing that has the appearance of a *medicine*, I was induced to turn in my mind how to exhibit the Cowhage in the form of a lozenge; and after some trials, succeeded in fixing on a formula that answers pretty well. It consists of a due proportion of things extremely simple: sugar, Indian arrow root, and gum tragacanth, but no efficient article except the Cowhage; unless in some few instances of private practice, or at the desire of the medical practitioner who attends in the family of the patient.

"But, though I have had many communications of the good effects of the lozenges, I cannot say I place so much dependance on them, or recommend them in my own practice, (unless where I meet with refractory and spoiled children, that are masters and mistresses over their mamma's) as I find the simple electuary, made with nothing but Cowhage and treacle, answer every purpose.

"Of this electuary, a tea-spoonful is in general found to be a sufficient dose for children, from infancy to the age of six or eight; from thence to fourteen, a desert-spoonful is found to answer well; and for all above that age, a table-spoonful. Formerly, I thought it might be sufficient if taken once a day; but experience has shewn me, that it answers better when taken twice; viz. at night, going to bed, and in the morning AN HOUR BEFORE BREAKFAST; and though little or no previous medicine is necessary, yet it is *generally* found to operate more effectually where a *gentle emetic* (provided nothing forbids it) has been premised.

"The Cowhage, after being begun upon, is to be continued for three or four days; after which, some brisk purgative, such as jalap, or infusion of senna, or, in short, whatever purging medicine is known to agree best with the patient, is to be taken; which will in general bring away the worms, if there be any. Afterwards, the Cowhage is to be continued as long as there may seem occasion; repeating the purgative at intervals of three or four days."

*Account*

### *Account of Diseases in an Eastern District of London, from November 20, to December 20, 1804.*

| | |
|---|---|
| ACUTE DISEASES. | |
| Peripneumonia Notha | 4 |
| Ephemera | 3 |
| Dysenteria | 7 |
| Rheumatismus Acutus | 5 |
| CHRONIC DISEASES. | |
| Tussis | 25 |
| Tussis cum Dyspnœa | 30 |
| Dyspnœa | 17 |
| Catarrhus | 5 |
| Hæmatemesis | 2 |
| Phthisis Pulmonalis | 3 |
| Hydrothorax | 2 |
| Hepatitis Chronica | 1 |
| Ascites | 3 |
| Amenorrhœa | 4 |
| Menorrhagia | 3 |
| Chlorosis | 4 |
| Diarrhœa | 14 |
| Paralysis | 2 |
| Rheumatismus Chronicus | 30 |
| PUERPERAL DISEASES. | |
| Menorrhagia Lochialis | 5 |
| Ephemera | 4 |
| Ischuria Vesicalis | 1 |
| INFANTILE DISEASES. | |
| Diarrhœa | 10 |
| Ascites | 1 |
| Ophthalmia | 2 |
| Vermes | 4 |

# MEDICAL AND PHYSICAL INTELLIGENCE.

## Queries relating to the Natural History of Syphilis.

Mr. Blair, surgeon of the Lock Hospital, &c. has been lately engaged in adding some notes to a translation of the celebrated Dr. Girtanner's Treatise upon the Venereal Disease; in which is contained a more elaborate and complete history of its origin and progress, than we have seen in any other publication. Many of our readers may not know that Dr. Girtanner has taken great pains to establish the common opinion (which Astruc espoused) of syphilis having been originally imported into Europe from America, by the companions of Columbus, in the year 1493.

But, Mr. Blair is said to have long since entertained an opposite opinion, and therefore has been induced to examine all the arguments on this subject, *de novo.* The general result of his enquiries (which he informs us were diligently prosecuted many years ago) is, that the venereal disease did not exist either in the Ame-can Islands or Continent, prior to the discoveries made by the Spaniards and others; and that there is no sufficient evidence of its transmission from Spain to Naples, and from thence to France, by the contending armies of Europe, who were at war about the year 1494.

Mr. Blair has communicated to us a few *queries* relative to this subject; which we willingly submit to the attention of our readers, in hopes that some correspondent may furnish him with a reply in our future Numbers.

1. What

1. What diseases among the ancients bore the nearest resemblance to syphilis, or the confirmed lues venerea, as it now exists in most parts of the globe?

2. Is there not good reason to conclude, that the yaws, or pians, (Frambœsia of Nosologists) prevailed in Asia, Africa, and America, at the precise time when the lues venerea was reputed to have made its first ravages in Europe?

3. Were not the yaws mistaken for the venereal disease by the early discoverers and historians of America; and has not this mistake given rise to the popular notion of syphilis being of American origin?

4. What epidemic disorders were predominant in Spain, Germany, Italy, &c. when the symptoms of lues venerea made so great a progress in Europe, and especially in those countries which were at war with France, before the conclusion of the 15th century?

5. Are there any positive historical proofs, founded on ocular evidence, of the genuine venereal disease existing among the sailors of Columbus, at the time of their return from Hispaniola to Portugal and Spain, A. D. 1493?

6. Was not the syphilitic virus conveyed to St. Domingo by the Spaniards, of whom Columbus says one hundred and sixty were infected in August, 1498; rather than that they received this infection from the native West Indians, as is generally affirmed by medical writers?

7. Have not the Europeans disseminated this direful complaint over the American continent, and among the South-Sea islanders, as well as in other newly discovered countries, where the syphilis was previously unknown?

8. Is there at present any nation in the world among whom this disease has not been experienced, or has but very recently been introduced; and can it now be eradicated entirely, or mitigated in its symptoms wherever it already exists?

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Dr. Wollaston has discovered another new metal in crude platina, to which he has given the name of Rhodium. It is dissolved, together with the platina, in nitro-muriatic acid. From this solution, the platina being thrown down by sal-ammoniac, a plate of zinc precipitates all the other metals except iron. The black powder thrown down by the zinc is digested in very weak nitric acid, to dissolve any copper. The whole is then dissolved in nitro-muriatic-acid. Mix the solution with common salt, evaporated to dryness by a very gentle heat; wash the residuum with alcohol till the alcohol comes off colourless: what remains behind is a soda-muriat of rhodium. Dissolve it in water; add a cylinder of zinc; heat the black powder which is thus obtained, mixing it with borax. The powder becomes white, and acquires a metallic lustre. In this state it is pure rhodium. The name was given in consequence of the fine red solutions which it makes with acids. It is infusible; its specific gravity is 11. It is not precipitated by sal-ammoniac, common salt, prussiat of potash, or hydro-sulphuret of ammonia.

## RESOLUTIONS OF THE DOCK JENNERIAN SOCIETY.

The undersigned medical gentlemen of this town have seen with extreme concern the late malignancy of the Small-pox, which, in several instances, have again swept away nearly whole families. They lament these effects of this destructive disease the more at this time, because *they have immediately arisen from the introduction of it by inoculation*; a practice which, from its very commencement, has, by maintaining a source of perpetual circulation to this fatal poison, added considerably to its general mortality. Adverting to these irresistable facts, they have again consulted together; and, after the most deliberate re-consideration of all the existing circumstances connected with Vaccine Inoculation, feel themselves *conscientiously* and *professionally* called upon to adhere to their former resolutions and reciprocal engagements; and have accordingly renewed their determination, *not to inoculate for the Small-pox*, excepting after the inoculation for the Cow-pox; and that only in peculiar circumstances, where an experiment may be required to satisfy doubting parents. But in no instance can they *recommend* the exposure to so *malignant a poison.*

They judge the communication of these Resolutions, coupled with the practice of inoculating their *own families with the cow-pock exclusively*, the most decisive and satisfactory means of conveying to the public their perfect reliance on this mild preventive, for protection against the small-pox.

While the undersigned are industriously and disinterestedly endeavouring to remove *so pestilential a disease* from this town, it would give them the highest satisfaction to see the medical gentlemen in the neighbouring towns, generally and unitedly engaged in adopting similar means, to accomplish so desirable an end.

In prosecuting, therefore, the attainment of a great public benefit, by a means sanctioned and recommended by the Legislature, they deem it no deviation from the strictest attention to *professional etiquette*, respectfully to solicit the co-operation of their medical brethren.

VAUGHAN MAY, M.D.
ROBERT SARGENT,
DANIEL LITTLE,
RICHARD DUNNING,
DIGORY MORRIS SPRY,
JOHN SMITH,
JOHN LOWER,
JOHN PENKIVIL,
JOHN BONE.

N. B. The Subscribers again invite the poor in this neighbourhood to avail themselves of this mild and effectual protection against the small-pox; they can be inoculated gratuitously at the usual time and place, or at any time, by application to the respective houses of the subscribers.

*Plymouth, Dec.* 14, 1804.

BILL

# *BILL OF MORTALITY,*

## For Portsmouth, New Hampshire, for A. D. 1803.

### By LYMAN SPALDING, M.B. &c.

| COMPLAINT. | AGE. | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept | Oct. | Nov. | Dec. | Total. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Abscess in the lungs | 19, 53 years | | 1 | | | | | | | | 1 | | | 2 |
| Apoplexy | 85, 54, 48 years | | | 1 | | 1 | | | | | 1 | | | 3 |
| Asthma | 40 years | | | | 1 | | | | | | | | | 1 |
| Atrophy | 2, 12, 2m. 11d. 3m. 2y. 18, 14m. 3w. | 1 | | | | | 1 | 1 | 1 | 1 | 2 | | 2 | 9 |
| Bleeding from the lungs | 55, 61 years | | | | 1 | | 1 | | | | | | | 2 |
| Cankerrash or Scarlatina | 11, 6m. 1m. 5, 1, 17, 2, 25, 22, 35, 1, 20, 3, 3, 22, 11, 6, 4, 10, 3m. 6, 10m. 9, 37, 3, 3, 4m. 4, 12, 16, 1 years | 6 | 5 | 5 | | | 2 | 4 | 5 | 2 | 2 | | | 31 |
| Cholera of Infants | 3y. 6m. 18 months | | | | | | | 1 | | 1 | 1 | | | 3 |
| Cholic bilious | 33, 30 years | 1 | | | | | | 1 | | | | | | 2 |
| Consumption | 40, 69, 39, 38, 25, 36, 24, 18, 27, 72, 43, 38, 35, 48, 15, 22, 24, 15, 44, 60 years | 4 | 2 | 4 | | | 2 | 1 | | 1 | 2 | | 4 | 20 |
| Convulsions | 60, 20, 2w. 3w. 1w. 4w. 38, 1d. 14, 1, 39 years | | | 1 | 1 | | 2 | 3 | 2 | | | | 2 | 11 |
| Dropsy | 55, 40, 28, 3, 47, 77, 40, 44, 22 years | 2 | | 2 | | | | 2 | 1 | | 1 | | 1 | 9 |
| Dropsy in the brain | 10, 4m. 18, 6m. | 2 | | | | | 1 | | | | | 1 | | 4 |
| Dropsy on the head | 2 years | | | | | 1 | | | | | | | | 1 |
| Dropsy in the breast | 21 years | | | | | | | | 1 | | | | | 1 |
| Dysentery | 9 months | | | | | | | | | 1 | | | | 1 |

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epilepsy | 40, 1 years | | | | | | | | | | 1 | | 1 | 2 |
| Erysipelas | 5 months | | | | 1 | | | | | | | | | 1 |
| Fever and Ague | 18 years | | | | | 1 | | | | | | | | 1 |
| Fever bilious | 17, 40 years | | | 1 | | 1 | | | | | | | | 2 |
| Fever pulmonic | 50, 22, 46, 50, 72, 23, 62, 56, 70, 72, 7, 77, 35 | | | 1 | 2 | 5 | 2 | | | 1 | 1 | 1 | | 13 |
| Fever typhus | 71, 53 years | | | 1 | | | | | | | | 1 | | 2 |
| Inflammation of the bowels | 23 years | | | | | | 1 | | | | | | | 1 |
| Jaundice | 49 years | | 1 | | | | | | | | | | | 1 |
| Lock-Jaw | 38 years | | 1 | | | | | | | | | | | 1 |
| Nephritis | 43 years | | | | | | | 1 | | | | | | 1 |
| Old age | 87, 88, 74, 80, 74, 82, 78, 78, 86, 86 years | 3 | 1 | 2 | | 1 | 1 | 2 | | | | | | 10 |
| Palsy | 58, 82, 36 years | | | | 1 | 1 | | | | | | 1 | | 3 |
| Phrenzy | 48, 24 years | | | | | | 1 | | | | | 1 | | 2 |
| Premature birth | – | | | | 1 | | | | 1 | | | | | 2 |
| Quinsy | 2, 22 years | | | | | | | | | | 1 | 1 | | 2 |
| Scrophula | 12 years | | | 1 | | | | | | | | | | 1 |
| *Casualties.* Overlaid | 1 month | | | | 1 | | | | | | | | | 1 |
| *Casualties.* Suicide | 28 years | | | | | | | | 1 | | | | | 1 |
| Total | | 19 | 11 | 19 | 9 | 11 | 14 | 16 | 12 | 7 | 13 | 6 | 10 | 147 |

BIRTHS. { Males – 106, Females – 107 } Total – 213

Portsmouth, situated 43°, 5′ North; 6°, 26′ East Longitude from Washington, contains about 6000 inhabitants.

## Royal Jennerian Society.

Dr. Walker, in a letter to the Editors, dated Salisbury-square, 3, xij, 1804, says,—"The notice which ye gave last summer (1804) has brought an unremitting demand on the Central House for the matter of inoculation from all parts of the empire; and the applicants have not yet been disappointed. Will ye request them to send their letters, under cover, to Francis Freeling, Esq. General Post Office. I have been struck with the delicacy of those gentlemen who have left the enclosed letters unsealed. Such proof to the Postmasters General, though not required by them, shews that no private business is carried on by abuse of their generous liberality; shews that the humane and patriotic object, of giving facility to the Society, and to those who are disposed to co-operate with it in the pious attempt to exterminate the small-pox, is not perverted. In one or two instances, medical men remain unsupplied, from their giving their address imperfectly; some such cause is the only one that can ever put them into such predicament, and possibly excite in them a suspicion of neglect.

"Those who receive matter from the Central House ought to be in possession of the information that it is mostly sent to them on the day on which it was taken, which is commonly the viij. day of inoculation. At an earlier period it is peculiarly active, but small in quantity; at a later, it is less to be depended upon. This latter description of it I sometimes use myself, knowing that I shall have the opportunity of seeing the effect of it, and of re-inoculating in case of failure; but I should badly merit the confidence of the Medical Council of the Society, if I sent out matter to the world of which I was not certain of its producing the genuine vacciola.

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## St. Thomas's and Guy's Hospitals.

The Lectures for the ensuing Season, at these adjoining Hospitals, will commence on the 1st of February.

*St. Thomas's Hospital.*—Anatomy, human and comparative, by Mr. Cline and Mr. Cooper. Principles and Practice of Surgery, by Mr. Cooper.

*Guy's Hospital.*—Practice of Medicine, by Dr. Babington and Dr. Curry.

Chemistry and Experimental Philosophy, by Dr. Babington and Mr. Allen.

Theory of Medicine and Materia Medica, by Dr. Curry.

Midwifery and the Diseases of Women and Children, by Dr. Haighton.

Physiology, or Laws of the Animal Economy, by Dr. Haighton.

Regular Clinical Lectures on select Medical Cases, by Drs. Babington, Curry, and Marcet.

Some time in the Spring will be given a Course of Lectures on the Structure and Diseases of the Teeth, by Mr. Fox, surgeon-dentist; and on the Veterinary Art, by Mr. Coleman, Professor at the Veterinary College.

These several Lectures are so arranged, that no two of them interfere with each other in the hours of attendance; and the whole is calculated to form a complete Course of Medical and Chirurgi-

cal Instruction. Terms, and other particulars, to be learnt from Mr. Stocker, apothecary to Guy's Hospital, who is also empowered to enter gentlemen as pupils to such of the lectures as are delivered at Guy's. Among the numerous improvements that are now carrying on at Guy's Hospital, intended to facilitate and to increase the acquisition of medical and chirurgical science to pupils, not only a new, enlarged, and commodious Lecturing Theatre has been built, so contrived as to admit of the several chemical processes being carried on before the class; but there is already in considerable forwardness, an extensive Library and Museum, in which, along with the valuable collection of books belonging to the Physical Society, there will be deposited the various morbid preparations that are daily accumulating, with a correct account of the respective cases to which they belonged, so as to form a registry of Practice, and a collection of facts, that must prove of the utmost importance to future inquirers.

Numbers of gentlemen in extensive business, to whom opportunities occur of procuring preparations of singular rarity and value, but which become nearly useless when confined to their small private collections, will thus have the means not only of rendering them extensively beneficial, but of perpetuating their names as contributors to the common stock of Medical Science. Accordingly, not only those who have received their professional education at this Hospital, but many others, whose names and talents are of the first rank, have promised their assistance towards the undertaking.

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*Medical Theatre, St. Bartholemew's Hospital.*

The Spring Courses of Lectures will begin at this Theatre in the following order:

On the Theory and Practice of Medicine, by Dr. Roberts and Dr. Powell.

On Anatomy and Physiology, by Mr. Abernethy.

On the Theory and Practice of Surgery, by Mr. Abernethy.

On Comparative Anatomy and the Laws of Organic Existence, by Mr. Macartney.

On Chemistry and the Materia Medica, by Dr. Powell and Dr. Edwards.

On Midwifery and the Diseases of Women and Children, by Dr. Thynne.

The Anatomical Lectures will begin about the 30th of January, 1805, and the other Lectures in the course of the same week.

Further particulars may be known by applying to Mr. Nicholson, at the apothecary's shop, St. Bartholemew's Hospital.

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*Theatre, London Hospital.*

Mr. Headington and Mr. Frampton, will commence their Spring Course of Lectures upon Anatomy, Physiology, and the Principles and Operations of Surgery, on Saturday, January 19, at two o'clock.

Demonstrations and Dissection as usual, by Mr. Armiger.

Dr. Dennison will lecture on the Theory and Practice of Midwifery.

*Medical Theatre, Clifford Street, Burlington Gardens.*

Dr. Badham's Course of Lectures on Medicine and Chemistry, will commence on Monday, January 21, at the usual hour. The Medical Lectures at eight, the Chemical at nine in the morning; a Clinical Lecture will be delivered twice a week, on such cases as may be sufficiently interesting in the limits of the Westminster General Dispensary. For further particulars apply to Dr. Badham, No. 15, Clifford Street, whére, or at the Dispensary in Gerrard Street, a prospectus may be had.

*Theatre of Anatomy, Blenheim Street, Great Marlborough Street.*

Mr. Brookes will commence his Spring Course of Lectures on Anatomy, Physiology, and Surgery, on Saturday, January 19, at two o'clock. A suite of commodious apartments, thoroughly ventilated, and replete with every convenience for the purposes of dissecting and injecting, will be open every morning till two o'clock, where Mr. Brookes attends.

Dr. Bradley's Lectures on the Practice of Medicine will commence on Wednesday, the 9th of January next, at his house, No. 25, Parliament Street.

Dr. Batty will commence his Spring Course of Lectures on the Theory and Practice of Midwifery, and on the Diseases of Women and Children, on Monday, January 21, at half past ten o'clock, at his house, Great Marlborough Street.

Mr. Blair's Physiological Lectures, for the information of scientific and professional gentlemen, amateurs of Natural History, students in the liberal and fine Arts, &c. will recommence on the 8th of January; and be continued every succeeding Tuesday and Friday evening, at eight o'clock precisely. This Course is illustrated by select anatomical preparations, drawings, models, casts, and a living muscular subject. Further particulars may be learnt at Mr. Blair's house, Great Russel-street, Bloomsbury, where may be had a printed Syllabus of the Lectures.

Mr. Chévalier will commence his next Course of Lectures on the Principles and Operations of Surgery, on Wednesday, Jan. 30, at seven o'clock in the evening, at his house, South Audley Street, Grosvenor Square, where printed particulars may be had.

We are happy to learn, that the Proposal laid before the Public several months since by Mr. Sanders, for the Establishment of a Dispensary for the Relief of Diseases of the Eye and Ear, continues to meet with the most respectable patronage; and that the fund already subscribed is sufficient to warrant the immediate organization of the Charity.

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## To CORRESPONDENTS.

Communications are received from Drs. Domeyer, Hall, King, Male, Trotter, and Weatherhouse; Messrs. Hume, Scott, Taynton, and Wilkinson.